

# 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  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

ADDRESS (number and street) 322 4TH STREET NE  
 Check if different than previously reported. (ACC)  
WASHINGTON DC 20002

2. **FEC IDENTIFICATION NUMBER** C00387555  
**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 John D. Isaacs

Signature of Treasurer Electronically Filed by John D. Isaacs Date 01 09 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**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

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		36110.32
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	32708.01									
(c) Total Receipts (from Line 19) .....	41087.30	143682.16								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	73795.31	179792.48								
7. Total Disbursements (from Line 31) .....	15909.52	121906.69								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	57885.79	57885.79								
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) .....	6095.25									

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  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

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	18825.00	51154.52
(i) Itemized (use Schedule A) .....	22261.00	77927.95
(ii) Unitemized .....	41086.00	129082.47
(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) .....	41086.00	129082.47
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	14500.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	1.30	99.69
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)) .....	41087.30	143682.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	41087.30	143682.16

**DETAILED SUMMARY PAGE**

of Disbursements

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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.....	734.52	38562.86
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	734.52	38562.86
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15175.00	76977.83
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	4000.00
(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	4000.00
29. Other Disbursements.....	0.00	2366.00
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))..	15909.52	121906.69
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	15909.52	121906.69

**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) .....	41086.00	129082.47
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	4000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	41086.00	125082.47
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	734.52	38562.86
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	14500.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	734.52	24062.86

**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 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Herbert L Abrams

Mailing Address 714 Alvarado Row

City State Zip Code  
Stanford CA 94305-1049

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

Name of Employer Occupation  
Stanford University Professor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.27602

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Susan S Adler

Mailing Address 161 E Chicago Ave Apt 35E

City State Zip Code  
Chicago IL 60611-6672

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.24853

Amount of Each Receipt this Period  
50.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Susan S Adler

Mailing Address 161 E Chicago Ave Apt 35E

City State Zip Code  
Chicago IL 60611-6672

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.24854

Amount of Each Receipt this Period  
50.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	250.00
<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 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. Sheila B Ainbinder</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 1085 Park Ave		Transaction ID: SA11A1.24855	
City New York	State NY	Zip Code 10128-1168	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Earmark to Benjamin Cardin (MD-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B. Michele Aisenberg</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 30 W 60th St Apt 14R		Transaction ID: SA11A1.24856	
City New York	State NY	Zip Code 10023-7914	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Earmark to Robert C. Byrd (WV-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C. Michele Aisenberg</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 30 W 60th St Apt 14R		Transaction ID: SA11A1.24857	
City New York	State NY	Zip Code 10023-7914	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Earmark to Ned Lamont (CT-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Kamesh Aiyer		Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2006	
Mailing Address 204 Pleasant St.		Transaction ID: SA11A1.24859	
City Brookline	State MA	Amount of Each Receipt this Period 500.00	
Zip Code 02446		Earmark to Bernie Sanders (VT-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer EMC Corporation	Occupation Software Engineer	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ .00			

Full Name (Last, First, Middle Initial) <b>B.</b> Kamesh Aiyer		Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2006	
Mailing Address 204 Pleasant St.		Transaction ID: SA11A1.24860	
City Brookline	State MA	Amount of Each Receipt this Period 200.00	
Zip Code 02446		Earmark to John Tester (M-T-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer EMC Corporation	Occupation Software Engineer	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ .00			

Full Name (Last, First, Middle Initial) <b>C.</b> Kamesh Aiyer		Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2006	
Mailing Address 204 Pleasant St.		Transaction ID: SA11A1.24861	
City Brookline	State MA	Amount of Each Receipt this Period 200.00	
Zip Code 02446		Earmark to Sherrod Brown (OH-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer EMC Corporation	Occupation Software Engineer	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ .00			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 9 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. Kamesh Aiyer</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2006	
Mailing Address 204 Pleasant St.		Transaction ID: SA11A1.24862	
City Brookline	State MA	Zip Code 02446	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C		Earmark to Bob Menendez (NJ-00S)	
Name of Employer EMC Corporation	Occupation Software Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. Kathryn Albrecht</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address PO Box 422		Transaction ID: SA11A1.24864	
City San Antonio	State NM	Zip Code 78732-0422	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C		Earmark to Bob Casey (PA-00S)	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. Kathryn Albrecht</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address PO Box 422		Transaction ID: SA11A1.24868	
City San Antonio	State NM	Zip Code 78732-0422	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C		Earmark to John Tester (M-T-00S)	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

[MEMO ITEM]

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	0.00

# 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 10 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Kathryn Albrecht		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address PO Box 422		Transaction ID: SA11A1.24863	
City San Antonio	State NM	Amount of Each Receipt this Period 10.00	
Zip Code 87832-0422		Earmark to Eric Massa (NY-09H)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Kathryn Albrecht		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address PO Box 422		Transaction ID: SA11A1.24865	
City San Antonio	State NM	Amount of Each Receipt this Period 10.00	
Zip Code 87832-0422		Earmark to Jerry McNerny (CA-11H)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Kathryn Albrecht		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address PO Box 422		Transaction ID: SA11A1.24866	
City San Antonio	State NM	Amount of Each Receipt this Period 10.00	
Zip Code 87832-0422		Earmark to John Cranley (OH-01H)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Kathryn Albrecht

Mailing Address PO Box 422

City San Antonio State NM Zip Code 87832-0422

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	6

Transaction ID: SA11A1.24867

Amount of Each Receipt this Period  

10.00
-------

Earmark to Patty Wetterling (MN-06H)

**[MEMO ITEM]**

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

Mailing Address 1114 Waltham Rd

City Simi Valley State CA Zip Code 93065-4459

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.24869

Amount of Each Receipt this Period  

5.00
------

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Edith A Allen-Schult

Mailing Address 83 Lincoln Ave

City Albany State NY Zip Code 12206-1437

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.24871

Amount of Each Receipt this Period  

40.00
-------

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00			
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<table border="1"><tr><td> </td></tr></table>	

# 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 / 932
	<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	

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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Edith A Allen-Schult

Mailing Address 83 Lincoln Ave

City Albany State NY Zip Code 12206-1437

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 27 / 2006

Transaction ID: SA11A1.24872

Amount of Each Receipt this Period  
 30.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Edith A Allen-Schult

Mailing Address 83 Lincoln Ave

City Albany State NY Zip Code 12206-1437

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 27 / 2006

Transaction ID: SA11A1.24873

Amount of Each Receipt this Period  
 30.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Edith A Allen-Schult

Mailing Address 83 Lincoln Ave

City Albany State NY Zip Code 12206-1437

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 27 / 2006

Transaction ID: SA11A1.24874

Amount of Each Receipt this Period  
 40.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 13 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Edith A Allen-Schult		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 83 Lincoln Ave		Transaction ID: SA11A1.24875	
City Albany	State NY	Amount of Each Receipt this Period 40.00	
Zip Code 12206-1437		Earmark to Sherrod Brown (OH-00S)	
FEC ID number of contributing federal political committee. <b>C</b>		<b>[MEMO ITEM]</b>	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Edith A Allen-Schult		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 83 Lincoln Ave		Transaction ID: SA11A1.24876	
City Albany	State NY	Amount of Each Receipt this Period 60.00	
Zip Code 12206-1437		Earmark to John Tester (M-T-00S)	
FEC ID number of contributing federal political committee. <b>C</b>		<b>[MEMO ITEM]</b>	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Edith A Allen-Schult		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 83 Lincoln Ave		Transaction ID: SA11A1.24877	
City Albany	State NY	Amount of Each Receipt this Period 50.00	
Zip Code 12206-1437		Earmark to Bernie Sanders (VT-00S)	
FEC ID number of contributing federal political committee. <b>C</b>		<b>[MEMO ITEM]</b>	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Edith A Allen-Schult

Mailing Address 83 Lincoln Ave

City Albany State NY Zip Code 12206-1437

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 27 / 2006

Transaction ID: SA11A1.24878

Amount of Each Receipt this Period  
 40.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

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

Mailing Address PO Box 8288

City Santa Cruz State CA Zip Code 95061-8288

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.24880

Amount of Each Receipt this Period  
 200.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Ralph Alpert

Mailing Address PO Box 8288

City Santa Cruz State CA Zip Code 95061-8288

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.24881

Amount of Each Receipt this Period  
 200.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 15 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Ralph Alpert Mailing Address PO Box 8288 City Santa Cruz State CA Zip Code 95061-8288 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.24883 Amount of Each Receipt this Period 200.00 Earmark to Sherrod Brown (OH-00S) <b>[MEMO ITEM]</b>
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	

<b>B.</b> Full Name (Last, First, Middle Initial) Ralph Alpert Mailing Address PO Box 8288 City Santa Cruz State CA Zip Code 95061-8288 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.24884 Amount of Each Receipt this Period 200.00 Earmark to Benjamin Cardin (MD-00S) <b>[MEMO ITEM]</b>
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	

<b>C.</b> Full Name (Last, First, Middle Initial) Ralph Alpert Mailing Address PO Box 8288 City Santa Cruz State CA Zip Code 95061-8288 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.24879 Amount of Each Receipt this Period 150.00 Earmark to Dan Maffei (NY-25H) <b>[MEMO ITEM]</b>
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>0.00</b>
<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 16 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Ralph Alpert

Mailing Address PO Box 8288

City State Zip Code  
Santa Cruz CA 95061-8288

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.24882

Amount of Each Receipt this Period  
150.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Carl Nestor Anderson

Mailing Address 439 49th St Apt 35

City State Zip Code  
Oakland CA 94609-2156

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.24886

Amount of Each Receipt this Period  
90.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Clifford E Anderson

Mailing Address 1408 La Sierra Dr

City State Zip Code  
Sacramento CA 95864-3035

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.24887

Amount of Each Receipt this Period  
100.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 17 / 932
	<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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

Full Name (Last, First, Middle Initial) <b>A. Frank C Andrews</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 1025 Laurent St		<b>Transaction ID: SA11A1.27588</b>	
City State Zip Code Santa Cruz CA 95060-2505	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer University of California	Occupation Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Frank C Andrews</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 1025 Laurent St		<b>Transaction ID: SA11A1.27589</b>	
City State Zip Code Santa Cruz CA 95060-2505	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer University of California	Occupation Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Annonymous Annonymous</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 419 Prentiss St		<b>Transaction ID: SA11A1.24889</b>	
City State Zip Code San Francisco CA 94110-6142	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Earmark to John Tester (M-T-00S)

[MEMO ITEM]

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<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 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.24890

Amount of Each Receipt this Period  
 20.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.24891

Amount of Each Receipt this Period  
 20.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Steven G Axelrod

Mailing Address 1750 Canyon Hill Drive

City State Zip Code  
 Riverside CA 92506-5668

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 21 / 2006

Transaction ID: SA11A1.24892

Amount of Each Receipt this Period  
 25.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 19 / 932
	<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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Elaine Bailer

Mailing Address 3231 Philadelphia Drive #1A

City State Zip Code  
**Dayton OH 45405**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 30 2006**

**Transaction ID: SA11A1.24894**

Amount of Each Receipt this Period  
.....50.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

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

Mailing Address 2121 E Shelby St

City State Zip Code  
**Seattle WA 98112-2027**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 15 2006**

**Transaction ID: SA11A1.24895**

Amount of Each Receipt this Period  
.....50.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Marshall Baker

Mailing Address 2121 E Shelby St

City State Zip Code  
**Seattle WA 98112-2027**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 15 2006**

**Transaction ID: SA11A1.24896**

Amount of Each Receipt this Period  
.....50.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>0.00</b>
<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 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Marshall Baker		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 2121 E Shelby St		Transaction ID: SA11A1.24897	
City Seattle	State WA	Amount of Each Receipt this Period 50.00	
Zip Code 98112-2027		Earmark to John Tester (M-T-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

B. Full Name (Last, First, Middle Initial) Marshall Baker		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 2121 E Shelby St		Transaction ID: SA11A1.24899	
City Seattle	State WA	Amount of Each Receipt this Period 50.00	
Zip Code 98112-2027		Earmark to Ned Lamont (CT-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

C. Full Name (Last, First, Middle Initial) Marshall Baker		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 2121 E Shelby St		Transaction ID: SA11A1.24900	
City Seattle	State WA	Amount of Each Receipt this Period 50.00	
Zip Code 98112-2027		Earmark to Bob Menendez (NJ-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 21 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Marshall Baker		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 2121 E Shelby St		Transaction ID: SA11A1.24901
City State Zip Code Seattle WA 98112-2027	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Daniel Akada (HI-00S)  <b>[MEMO ITEM]</b>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) <b>B.</b> Marshall Baker		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 2121 E Shelby St		Transaction ID: SA11A1.24905
City State Zip Code Seattle WA 98112-2027	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Sherrod Brown (OH-00S)  <b>[MEMO ITEM]</b>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) <b>C.</b> Marshall Baker		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006
Mailing Address 2121 E Shelby St		Transaction ID: SA11A1.24898
City State Zip Code Seattle WA 98112-2027	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Joseph A. Sestak (PA-07H)  <b>[MEMO ITEM]</b>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

**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 22 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Marshall Baker

Mailing Address 2121 E Shelby St

City State Zip Code  
Seattle WA 98112-2027

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.24902

Amount of Each Receipt this Period  
50.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

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

Mailing Address 2121 E Shelby St

City State Zip Code  
Seattle WA 98112-2027

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.24903

Amount of Each Receipt this Period  
50.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Marshall Baker

Mailing Address 2121 E Shelby St

City State Zip Code  
Seattle WA 98112-2027

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.24904

Amount of Each Receipt this Period  
50.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Frank C Baldwin		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 149 Pine Tree Rd		<b>Transaction ID:</b> SA11A1.24906	
City Ithaca	State NY	Amount of Each Receipt this Period 100.00	
Zip Code 14850-6331		Earmark to Sherrod Brown (OH-00S)	
FEC ID number of contributing federal political committee. <b>C</b>		<b>[MEMO ITEM]</b>	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>B.</b> Full Name (Last, First, Middle Initial) Frank C Baldwin		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 149 Pine Tree Rd		<b>Transaction ID:</b> SA11A1.24907	
City Ithaca	State NY	Amount of Each Receipt this Period 100.00	
Zip Code 14850-6331		Earmark to Bob Menendez (NJ-00S)	
FEC ID number of contributing federal political committee. <b>C</b>		<b>[MEMO ITEM]</b>	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>C.</b> Full Name (Last, First, Middle Initial) Frank C Baldwin		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 149 Pine Tree Rd		<b>Transaction ID:</b> SA11A1.24908	
City Ithaca	State NY	Amount of Each Receipt this Period 100.00	
Zip Code 14850-6331		Earmark to Robert C. Byrd (WV-00S)	
FEC ID number of contributing federal political committee. <b>C</b>		<b>[MEMO ITEM]</b>	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 24 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Frank C Baldwin		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006
Mailing Address 149 Pine Tree Rd		<b>Transaction ID:</b> SA11A1.24909
City State Zip Code Ithaca NY 14850-6331	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Earmark to John Tester (M-T-00S)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

<b>B.</b> Full Name (Last, First, Middle Initial) Philip Ballbach		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006
Mailing Address 2723 E Lake Lansing Rd		<b>Transaction ID:</b> SA11A1.24911
City State Zip Code East Lansing MI 48823-9703	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Earmark to John Tester (M-T-00S)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

<b>C.</b> Full Name (Last, First, Middle Initial) Philip Ballbach		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006
Mailing Address 2723 E Lake Lansing Rd		<b>Transaction ID:</b> SA11A1.24912
City State Zip Code East Lansing MI 48823-9703	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Earmark to Sherrod Brown (OH-00S)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 25 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Philip Ballbach

Mailing Address 2723 E Lake Lansing Rd

City State Zip Code  
East Lansing MI 48823-9703

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.24913

Amount of Each Receipt this Period  
50.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

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

Mailing Address 2723 E Lake Lansing Rd

City State Zip Code  
East Lansing MI 48823-9703

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.24914

Amount of Each Receipt this Period  
50.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Lynne Banta

Mailing Address 1443 N Ave 49

City State Zip Code  
Los Angeles CA 90042

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2006

Transaction ID: SA11A1.24915

Amount of Each Receipt this Period  
50.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 26 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
James M Bardeen

Mailing Address 7321 47th Ave NE

City State Zip Code  
**Seattle WA 98115-6102**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 15 2006**

**Transaction ID: SA11A1.24917**

Amount of Each Receipt this Period  
.....50.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
James M Bardeen

Mailing Address 7321 47th Ave NE

City State Zip Code  
**Seattle WA 98115-6102**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 15 2006**

**Transaction ID: SA11A1.24918**

Amount of Each Receipt this Period  
.....50.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
James M Bardeen

Mailing Address 7321 47th Ave NE

City State Zip Code  
**Seattle WA 98115-6102**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 15 2006**

**Transaction ID: SA11A1.24919**

Amount of Each Receipt this Period  
.....50.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 27 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
James M Bardeen

Mailing Address 7321 47th Ave NE

City State Zip Code  
Seattle WA 98115-6102

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.24920

Amount of Each Receipt this Period  
50.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

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

Mailing Address 10502 Gilmore Drive

City State Zip Code  
Silver Spring MD 20901-4630

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 16 / 2006

Transaction ID: SA11A1.24922

Amount of Each Receipt this Period  
100.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Robert F Barnes

Mailing Address 905 Delaware Ave

City State Zip Code  
Fountain Hill PA 18015-2503

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.24924

Amount of Each Receipt this Period  
50.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 28 / 932
<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Octo Barnett		Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2006	
Mailing Address 34 Westminster Rd		Transaction ID: SA11A1.24926	
City Newton	State MA	Amount of Each Receipt this Period 50.00	
Zip Code 02459		Earmark to John Tester (M-T-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Octo Barnett		Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2006	
Mailing Address 34 Westminster Rd		Transaction ID: SA11A1.24927	
City Newton	State MA	Amount of Each Receipt this Period 50.00	
Zip Code 02459		Earmark to Bob Menendez (NJ-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Octo Barnett		Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2006	
Mailing Address 34 Westminster Rd		Transaction ID: SA11A1.24928	
City Newton	State MA	Amount of Each Receipt this Period 50.00	
Zip Code 02459		Earmark to Sherrod Brown (OH-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 29 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Octo Barnett

Mailing Address 34 Westminster Rd

City State Zip Code  
Newton MA 02459

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	0	6

Transaction ID: SA11A1.24929

Amount of Each Receipt this Period  
 50.00

Earmark to Lois Murphy (P-A-06H)

**[MEMO ITEM]**

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

Mailing Address 34 Westminster Rd

City State Zip Code  
Newton MA 02459

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	0	6

Transaction ID: SA11A1.24930

Amount of Each Receipt this Period  
 50.00

Earmark to Kent Conrad (N-D-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Octo Barnett

Mailing Address 34 Westminster Rd

City State Zip Code  
Newton MA 02459

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	0	6

Transaction ID: SA11A1.24931

Amount of Each Receipt this Period  
 50.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value=""/> <b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value=""/>

# 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 30 / 932
<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Octo Barnett Mailing Address 34 Westminster Rd City State Zip Code Newton MA 02459 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2006 <b>Transaction ID:</b> SA11A1.24932 Amount of Each Receipt this Period 50.00 Earmark to Debbie Stabenow (MI-00S) <b>[MEMO ITEM]</b>
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	

<b>B.</b> Full Name (Last, First, Middle Initial) Octo Barnett Mailing Address 34 Westminster Rd City State Zip Code Newton MA 02459 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2006 <b>Transaction ID:</b> SA11A1.24933 Amount of Each Receipt this Period 50.00 Earmark to Eric Massa (NY-09H) <b>[MEMO ITEM]</b>
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	

<b>C.</b> Full Name (Last, First, Middle Initial) Patricia Joan Barry Mailing Address 634 S Spring St Ste 823 City State Zip Code Los Angeles CA 90014-3905 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006 <b>Transaction ID:</b> SA11A1.24935 Amount of Each Receipt this Period 40.00 Earmark to Bernie Sanders (VT-00S) <b>[MEMO ITEM]</b>
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 31 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. Patricia Joan Barry</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 634 S Spring St Ste 823		Transaction ID: SA11A1.24936	
City State Zip Code Los Angeles CA 90014-3905	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C	Earmark to Sherrod Brown (OH-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B. Richard H Barsanti</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 5305 Woodland Ave		Transaction ID: SA11A1.24941	
City State Zip Code Western Sprgs IL 60558-1855	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Earmark to Joseph A. Sestak (PA-07H)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C. Richard H Barsanti</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 5305 Woodland Ave		Transaction ID: SA11A1.24943	
City State Zip Code Western Sprgs IL 60558-1855	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Earmark to Betty Sutton (OH-13H)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 32 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Richard H Barsanti		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 5305 Woodland Ave		Transaction ID: SA11A1.24944	
City State Zip Code Western Sprgs IL 60558-1855	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>	Earmark to Bob Menendez (NJ-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Richard H Barsanti		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 5305 Woodland Ave		Transaction ID: SA11A1.24945	
City State Zip Code Western Sprgs IL 60558-1855	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>	Earmark to Sherrod Brown (OH-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Richard H Barsanti		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 5305 Woodland Ave		Transaction ID: SA11A1.24946	
City State Zip Code Western Sprgs IL 60558-1855	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>	Earmark to Diane Farrell (CT-04H)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 33 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Richard H Barsanti		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 5305 Woodland Ave		Transaction ID: SA11A1.24937	
City State Zip Code Western Sprgs IL 60558-1855	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Earmark to Zack Space (OH-19H)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Richard H Barsanti		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 5305 Woodland Ave		Transaction ID: SA11A1.24938	
City State Zip Code Western Sprgs IL 60558-1855	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Earmark to Dan Maffei (NY-25H)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Richard H Barsanti		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 5305 Woodland Ave		Transaction ID: SA11A1.24939	
City State Zip Code Western Sprgs IL 60558-1855	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Earmark to Bruce Braley (IA-01H)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

**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 34 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Richard H Barsanti

Mailing Address 5305 Woodland Ave

City State Zip Code  
Western Sprgs IL 60558-1855

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.24940

Amount of Each Receipt this Period  
50.00

Earmark to Julia Carson (IN-07H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Richard H Barsanti

Mailing Address 5305 Woodland Ave

City State Zip Code  
Western Sprgs IL 60558-1855

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.24942

Amount of Each Receipt this Period  
50.00

Earmark to Lois Murphy (P-A-06H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Doris Z Bato

Mailing Address 379 Calle Colina

City State Zip Code  
Santa Fe NM 87501-1017

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.24947

Amount of Each Receipt this Period  
100.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 35 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Doris Z Bato		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 379 Calle Colina		Transaction ID: SA11A1.24948	
City State Zip Code Santa Fe NM 87501-1017	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Joseph A. Sestak (PA-07H)	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>B.</b> Doris Z Bato		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 379 Calle Colina		Transaction ID: SA11A1.24949	
City State Zip Code Santa Fe NM 87501-1017	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Diane Farrell (CT-04H)	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>C.</b> Carol Beale		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 13818 Robinson Ridge Rd		Transaction ID: SA11A1.24950	
City State Zip Code Athens OH 45701-9435	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Sherrod Brown (OH-00S)	
Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

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

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

FOR LINE NUMBER: PAGE 36 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Ronald J Beaton

Mailing Address 2275 Montebello Dr W

City State Zip Code  
Colorado Spgs CO 80918-3611

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.24951

Amount of Each Receipt this Period  
5.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Ronald J Beaton

Mailing Address 2275 Montebello Dr W

City State Zip Code  
Colorado Spgs CO 80918-3611

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.24952

Amount of Each Receipt this Period  
5.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Allan Beek

Mailing Address 2007 Highland Dr

City State Zip Code  
Newport Beach CA 92660-4407

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.24954

Amount of Each Receipt this Period  
680.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 37 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Allan Beek		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 2007 Highland Dr		Transaction ID: SA11A1.24955	
City State Zip Code Newport Beach CA 92660-4407	Amount of Each Receipt this Period 680.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to John Tester (M-T-00S)	
Name of Employer Retired	Occupation Retired	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Allan Beek		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 2007 Highland Dr		Transaction ID: SA11A1.24956	
City State Zip Code Newport Beach CA 92660-4407	Amount of Each Receipt this Period 680.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Sherrod Brown (OH-00S)	
Name of Employer Retired	Occupation Retired	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Allan Beek		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 2007 Highland Dr		Transaction ID: SA11A1.24957	
City State Zip Code Newport Beach CA 92660-4407	Amount of Each Receipt this Period 340.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Joseph A. Sestak (PA-07H)	
Name of Employer Retired	Occupation Retired	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 38 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Allan Beek		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 2007 Highland Dr		Transaction ID: SA11A1.24958	
City Newport Beach	State CA	Amount of Each Receipt this Period 340.00	
Zip Code 92660-4407		Earmark to Bob Menendez (NJ-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer Retired	Occupation Retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ .00			

Full Name (Last, First, Middle Initial) <b>B.</b> Allan Beek		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 2007 Highland Dr		Transaction ID: SA11A1.24959	
City Newport Beach	State CA	Amount of Each Receipt this Period 680.00	
Zip Code 92660-4407		Earmark to Bob Casey (PA-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer Retired	Occupation Retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ .00			

Full Name (Last, First, Middle Initial) <b>C.</b> Allan Beek		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 2007 Highland Dr		Transaction ID: SA11A1.24960	
City Newport Beach	State CA	Amount of Each Receipt this Period 680.00	
Zip Code 92660-4407		Earmark to Ned Lamont (CT-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer Retired	Occupation Retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ .00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 39 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Allan Beek		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 2007 Highland Dr		Transaction ID: SA11A1.24961	
City State Zip Code Newport Beach CA 92660-4407	Amount of Each Receipt this Period 340.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Jerry McNerny (CA-11H)	
Name of Employer Retired	Occupation Retired	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Allan Beek		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 2007 Highland Dr		Transaction ID: SA11A1.24962	
City State Zip Code Newport Beach CA 92660-4407	Amount of Each Receipt this Period 340.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Sherrod Brown (OH-00S)	
Name of Employer Retired	Occupation Retired	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Allan Beek		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 2007 Highland Dr		Transaction ID: SA11A1.24963	
City State Zip Code Newport Beach CA 92660-4407	Amount of Each Receipt this Period 340.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Zack Space (OH-19H)	
Name of Employer Retired	Occupation Retired	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 40 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Ann C Bell		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 241 Orchard Dr		<b>Transaction ID:</b> SA11A1.24964	
City State Zip Code Dayton OH 45419-1722	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. C	Earmark to Sherrod Brown (OH-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>B.</b> Full Name (Last, First, Middle Initial) Gilbert G Bendix		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 266 Lake Dr		<b>Transaction ID:</b> SA11A1.27567	
City State Zip Code Kensington CA 94708-1132	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Earmark to Ned Lamont (CT-00S)		
Name of Employer Occupation Retired Retired	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Elizabeth Benedict		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 80 Seacape Dr		<b>Transaction ID:</b> SA11A1.24966	
City State Zip Code Muir Beach CA 94965-9751	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Earmark to Ned Lamont (CT-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]



# 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 41 / 932
	<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	

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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Elizabeth Benedict

Mailing Address 80 Seacape Dr

City State Zip Code  
Muir Beach CA 94965-9751

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.24967

Amount of Each Receipt this Period  
100.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

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

Mailing Address 80 Seacape Dr

City State Zip Code  
Muir Beach CA 94965-9751

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.24968

Amount of Each Receipt this Period  
100.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Elizabeth Benedict

Mailing Address 80 Seacape Dr

City State Zip Code  
Muir Beach CA 94965-9751

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.24969

Amount of Each Receipt this Period  
100.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 42 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Elizabeth Benedict		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 80 Seacape Dr		<b>Transaction ID:</b> SA11A1.24970	
City Muir Beach	State CA	Zip Code 94965-9751	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Earmark to Robert C. Byrd (WV-00S)	
Name of Employer	Occupation		<b>[MEMO ITEM]</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>B.</b> Full Name (Last, First, Middle Initial) Elizabeth Benedict		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 80 Seacape Dr		<b>Transaction ID:</b> SA11A1.24971	
City Muir Beach	State CA	Zip Code 94965-9751	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Earmark to Sherrod Brown (OH-00S)	
Name of Employer	Occupation		<b>[MEMO ITEM]</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>C.</b> Full Name (Last, First, Middle Initial) Elizabeth Benedict		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 80 Seacape Dr		<b>Transaction ID:</b> SA11A1.24972	
City Muir Beach	State CA	Zip Code 94965-9751	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Earmark to Benjamin Cardin (MD-00S)	
Name of Employer	Occupation		<b>[MEMO ITEM]</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

# 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 43 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Elizabeth Benedict

Mailing Address 80 Seacape Dr

City State Zip Code  
Muir Beach CA 94965-9751

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.24973

Amount of Each Receipt this Period  
100.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

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

Mailing Address 403 Brightwood Club Dr

City State Zip Code  
Lutherville MD 21093-3630

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.24975

Amount of Each Receipt this Period  
25.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Sheila R Benninger

Mailing Address 109 Autumn Ln

City State Zip Code  
Chapel Hill NC 27516-1101

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.24976

Amount of Each Receipt this Period  
25.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 44 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

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

Mailing Address 205 W 80th St Apt. 2B

City State Zip Code  
New York NY 10024-7039

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 27 / 2006

Transaction ID: SA11A1.24978

Amount of Each Receipt this Period  
50.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
John L Benson

Mailing Address 205 W 80th St Apt. 2B

City State Zip Code  
New York NY 10024-7039

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 27 / 2006

Transaction ID: SA11A1.24979

Amount of Each Receipt this Period  
100.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
John L Benson

Mailing Address 205 W 80th St Apt. 2B

City State Zip Code  
New York NY 10024-7039

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 27 / 2006

Transaction ID: SA11A1.24980

Amount of Each Receipt this Period  
100.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>0.00</b>
<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 45 / 932
	<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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

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

Mailing Address 205 W 80th St Apt. 2B

City State Zip Code  
New York NY 10024-7039

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 30 / 2006

Transaction ID: SA11A1.24977

Amount of Each Receipt this Period  
100.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Leonard D Berkovitz

Mailing Address 1131 Hillcrest Rd

City State Zip Code  
West Lafayette IN 47906-2211

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 15 / 2006

Transaction ID: SA11A1.24981

Amount of Each Receipt this Period  
35.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
William P Berlinghoff

Mailing Address 104 Court St

City State Zip Code  
Farmington ME 04938-5922

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 30 / 2006

Transaction ID: SA11A1.24982

Amount of Each Receipt this Period  
50.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

**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 46 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Aron Bernstein		Date of Receipt M M / D D / Y Y Y Y 09 / 09 / 2006	
Mailing Address 45B Museum St		Transaction ID: SA11A1.24983	
City Cambridge	State MA	Amount of Each Receipt this Period 200.00	
Zip Code 02138-1921		Earmark to Bob Menendez (NJ-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Aron Bernstein		Date of Receipt M M / D D / Y Y Y Y 09 / 09 / 2006	
Mailing Address 45B Museum St		Transaction ID: SA11A1.24984	
City Cambridge	State MA	Amount of Each Receipt this Period 200.00	
Zip Code 02138-1921		Earmark to John Tester (M-T-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Dale L Berry		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 840 Austin Ave		Transaction ID: SA11A1.24985	
City Grants	State NM	Amount of Each Receipt this Period 100.00	
Zip Code 87020-3307		Earmark to Joseph A. Sestak (PA-07H)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 47 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Dale L Berry

Mailing Address 840 Austin Ave

City State Zip Code  
Grants NM 87020-3307

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 25 / 2006

Transaction ID: SA11A1.24986

Amount of Each Receipt this Period  
100.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Dale L Berry

Mailing Address 840 Austin Ave

City State Zip Code  
Grants NM 87020-3307

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 25 / 2006

Transaction ID: SA11A1.24987

Amount of Each Receipt this Period  
100.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Dale L Berry

Mailing Address 840 Austin Ave

City State Zip Code  
Grants NM 87020-3307

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 25 / 2006

Transaction ID: SA11A1.24988

Amount of Each Receipt this Period  
100.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 48 / 932
	<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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Peter R. Betzer

Mailing Address 1830 Crescent Lake Dr

City State Zip Code  
**Saint Petersburg FL 33704-3322**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
**09 / 15 / 2006**

**Transaction ID: SA11A1.24990**

Amount of Each Receipt this Period  
35.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Richard S Blacher

Mailing Address 50 Plainfield St.

City State Zip Code  
**Waban MA 02468-1618**

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

Name of Employer Occupation  
Self-employed Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
**09 / 15 / 2006**

**Transaction ID: SA11A1.27570**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Linda C Black

Mailing Address 5 Hilliard Pl

City State Zip Code  
**Cambridge MA 02138-4923**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
**09 / 15 / 2006**

**Transaction ID: SA11A1.24991**

Amount of Each Receipt this Period  
40.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>500.00</b>
<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 49 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Linda C Black Mailing Address 5 Hilliard Pl City State Zip Code Cambridge MA 02138-4923 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.24992 Amount of Each Receipt this Period 40.00 Earmark to John Tester (M-T-00S) <b>[MEMO ITEM]</b>
--	--	--

<b>B.</b> Full Name (Last, First, Middle Initial) Linda C Black Mailing Address 5 Hilliard Pl City State Zip Code Cambridge MA 02138-4923 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y Y 09 / 27 / 2006 <b>Transaction ID:</b> SA11A1.24993 Amount of Each Receipt this Period 10.00 Earmark to Dan Maffei (NY-25H) <b>[MEMO ITEM]</b>
--	--	--

<b>C.</b> Full Name (Last, First, Middle Initial) Linda C Black Mailing Address 5 Hilliard Pl City State Zip Code Cambridge MA 02138-4923 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y Y 09 / 27 / 2006 <b>Transaction ID:</b> SA11A1.24994 Amount of Each Receipt this Period 30.00 Earmark to Bruce Braley (IA-01H) <b>[MEMO ITEM]</b>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 50 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Linda C Black

Mailing Address 5 Hilliard Pl

City State Zip Code  
Cambridge MA 02138-4923

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.24995

Amount of Each Receipt this Period  
10.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Laura A. Blacklow

Mailing Address 215 Erie St

City State Zip Code  
Cambridge MA 02139-3921

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	5	/	2	0	0	6

Transaction ID: SA11A1.24997

Amount of Each Receipt this Period  
20.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Laura A. Blacklow

Mailing Address 215 Erie St

City State Zip Code  
Cambridge MA 02139-3921

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	5	/	2	0	0	6

Transaction ID: SA11A1.24998

Amount of Each Receipt this Period  
20.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 51 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Barbara C Blackmore		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 1200 Charlevoix Ave Apt 1		Transaction ID: SA11A1.25000	
City Petoskey State MI Zip Code 49770-7703	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. <b>C</b>	Earmark to Robert C. Byrd (WV-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Robert L Blake		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 2322 Meadow Lark Ln		Transaction ID: SA11A1.25002	
City Columbia State MO Zip Code 65201-6246	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>	Earmark to Bob Menendez (NJ-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Robert L Blake		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 2322 Meadow Lark Ln		Transaction ID: SA11A1.25003	
City Columbia State MO Zip Code 65201-6246	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>	Earmark to John Tester (M-T-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	0.00

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

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

FOR LINE NUMBER: PAGE 52 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Robert L Blake

Mailing Address 2322 Meadow Lark Ln

City State Zip Code  
Columbia MO 65201-6246

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25004

Amount of Each Receipt this Period  
100.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Deborah I Block-Schwenk

Mailing Address 92 Gordon St Apt 403

City State Zip Code  
Boston MA 02135-6219

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

Name of Employer Occupation  
Berklee College of Music Professor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25005

Amount of Each Receipt this Period  
100.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Martin Bloomenthal

Mailing Address 36 Merritt Drive

City State Zip Code  
Lawrenceville NJ 08648-3157

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

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

Transaction ID: SA11A1.25006

Amount of Each Receipt this Period  
50.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 53 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Martin Bloomenthal

Mailing Address 36 Merritt Drive

City State Zip Code  
Lawrenceville NJ 08648-3157

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

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

Transaction ID: SA11A1.25007

Amount of Each Receipt this Period  
25.00

Earmark to Zack Space (OH-19H)

**[MEMO ITEM]**

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

Mailing Address 36 Merritt Drive

City State Zip Code  
Lawrenceville NJ 08648-3157

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

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

Transaction ID: SA11A1.25008

Amount of Each Receipt this Period  
25.00

Earmark to Lois Murphy (P-A-06H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Martin Bloomenthal

Mailing Address 36 Merritt Drive

City State Zip Code  
Lawrenceville NJ 08648-3157

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

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

Transaction ID: SA11A1.25009

Amount of Each Receipt this Period  
25.00

Earmark to Patricia Matrid (NM-01H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 54 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Charles H Bloomer

Mailing Address 1961 Gilardy Dr

City State Zip Code  
Concord CA 94518-3229

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.25010

Amount of Each Receipt this Period  
10.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Joan L Bolker

Mailing Address 10 Chester St

City State Zip Code  
Newton MA 02461-1416

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 02 / 2006

Transaction ID: SA11A1.25012

Amount of Each Receipt this Period  
100.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Joan L Bolker

Mailing Address 10 Chester St

City State Zip Code  
Newton MA 02461-1416

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2006

Transaction ID: SA11A1.25011

Amount of Each Receipt this Period  
50.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 55 / 932
	<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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Vera Boone

Mailing Address 3031 E Lakeshore Dr

City State Zip Code  
Twin Lakes WI 53181-9374

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25013

Amount of Each Receipt this Period  
15.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

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

Mailing Address 3031 E Lakeshore Dr

City State Zip Code  
Twin Lakes WI 53181-9374

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25014

Amount of Each Receipt this Period  
15.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Eugenie R Bradford

Mailing Address 4800 Fillmore Ave Apt 1359

City State Zip Code  
Alexandria VA 22311-5079

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.27569

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>500.00</b>
<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 56 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

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

Mailing Address 5062 Alicante Way

City State Zip Code  
Oceanside CA 92056-5159

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25015

Amount of Each Receipt this Period  
35.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Jeremy D. Bratt

Mailing Address 2902 Upton St NW

City State Zip Code  
Washington DC 20008-1151

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 20 / 2006

Transaction ID: SA11A1.25017

Amount of Each Receipt this Period  
35.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Bill Bray

Mailing Address 1105 S Cliffpark Cir

City State Zip Code  
Anaheim CA 92805-5954

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25019

Amount of Each Receipt this Period  
10.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 57 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Bill Bray

Mailing Address 1105 S Clifpark Cir

City State Zip Code  
Anaheim CA 92805-5954

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.25020

Amount of Each Receipt this Period  
10.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

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

Mailing Address 424 N Paterson St Apt 2

City State Zip Code  
Madison WI 53703-1537

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.25021

Amount of Each Receipt this Period  
20.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Mary Louise Brenneman

Mailing Address 1330 19th St

City State Zip Code  
Manhattan Bch CA 90266-4004

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.25023

Amount of Each Receipt this Period  
5.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 58 / 932
	<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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Caroline Bridgman-Rees

Mailing Address 35 Sunset Rd

City Hamden State CT Zip Code 06514-4609

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	6

Transaction ID: SA11A1.25024

Amount of Each Receipt this Period  

25.00
-------

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

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

Mailing Address 17 Berkeley St

City Watertown State MA Zip Code 02472-2809

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.25026

Amount of Each Receipt this Period  

20.00
-------

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Archie Brodsky

Mailing Address 17 Berkeley St

City Watertown State MA Zip Code 02472-2809

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.25027

Amount of Each Receipt this Period  

20.00
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Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00			
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<table border="1"><tr><td> </td></tr></table>	

**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 59 / 932
	<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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

Full Name (Last, First, Middle Initial) <b>A. William B Brokstein</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address <b>6939 Wren Ave NW</b>		<b>Transaction ID: SA11A1.25028</b>	
City <b>North Canton</b>	State <b>OH</b>	Zip Code <b>44720-7050</b>	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Sherrod Brown (OH-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B. Katherine Brooks</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address <b>407 Quail Run</b>		<b>Transaction ID: SA11A1.25030</b>	
City <b>Aptos</b>	State <b>CA</b>	Zip Code <b>95003-9720</b>	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to John Tester (M-T-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C. Katherine Brooks</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address <b>407 Quail Run</b>		<b>Transaction ID: SA11A1.25031</b>	
City <b>Aptos</b>	State <b>CA</b>	Zip Code <b>95003-9720</b>	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bob Casey (PA-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 60 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Stephen A Brooks

Mailing Address PO Box 27

City State Zip Code  
Carmel CA 93921-0027

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25032

Amount of Each Receipt this Period  
50.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Stephen A Brooks

Mailing Address PO Box 27

City State Zip Code  
Carmel CA 93921-0027

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25033

Amount of Each Receipt this Period  
50.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Stephen A Brooks

Mailing Address PO Box 27

City State Zip Code  
Carmel CA 93921-0027

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25034

Amount of Each Receipt this Period  
50.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 61 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. Stephen A Brooks</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address PO Box 27		Transaction ID: SA11A1.25035	
City Carmel	State CA	Zip Code 93921-0027	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Earmark to Francine Busby (CA-50H)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B. Barbara L Brown</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address PO Box 415		Transaction ID: SA11A1.25036	
City Orcas	State WA	Zip Code 98280-0415	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Earmark to John Tester (M-T-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C. Hamilton B Brown</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2006	
Mailing Address PO Box 399		Transaction ID: SA11A1.25037	
City Arroyo Seco	State NM	Zip Code 87514-0399	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Earmark to Bob Casey (PA-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 62 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Mary Grace Brown

Mailing Address 107 Mount Sinai Avenue

City State Zip Code  
Mount Sinai NY 11766

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2006

Transaction ID: SA11A1.25039

Amount of Each Receipt this Period  
25.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Stanley G Brown

Mailing Address PO Box 233

City State Zip Code  
New Suffolk NY 11956-0233

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25040

Amount of Each Receipt this Period  
50.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Stanley G Brown

Mailing Address PO Box 233

City State Zip Code  
New Suffolk NY 11956-0233

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.25041

Amount of Each Receipt this Period  
50.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 63 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Donald W Buchanan		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6
Mailing Address 1501 N Oracle Rd Apt 810		Transaction ID: SA11A1.25042
City State Zip Code Tucson AZ 85705-7283	Amount of Each Receipt this Period 4.00	
FEC ID number of contributing federal political committee. <b>C</b>	Earmark to Joseph A. Sestak (PA-07H)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) <b>B.</b> Donald W Buchanan		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6
Mailing Address 1501 N Oracle Rd Apt 810		Transaction ID: SA11A1.25043
City State Zip Code Tucson AZ 85705-7283	Amount of Each Receipt this Period 4.00	
FEC ID number of contributing federal political committee. <b>C</b>	Earmark to Diane Farrell (CT-04H)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) <b>C.</b> Donald W Buchanan		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6
Mailing Address 1501 N Oracle Rd Apt 810		Transaction ID: SA11A1.25044
City State Zip Code Tucson AZ 85705-7283	Amount of Each Receipt this Period 4.00	
FEC ID number of contributing federal political committee. <b>C</b>	Earmark to Dan Maffei (NY-25H)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 64 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Donald W Buchanan		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 1501 N Oracle Rd Apt 810		Transaction ID: SA11A1.25045	
City State Zip Code Tucson AZ 85705-7283	Amount of Each Receipt this Period 4.00		
FEC ID number of contributing federal political committee. <b>C</b>	Earmark to Bruce Braley (IA-01H)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> George Bunn		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 401 Webster St Apt 209		Transaction ID: SA11A1.25047	
City State Zip Code Palo Alto CA 94301-1249	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>	Earmark to Bob Menendez (NJ-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> George Bunn		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 401 Webster St Apt 209		Transaction ID: SA11A1.25046	
City State Zip Code Palo Alto CA 94301-1249	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>	Earmark to Benjamin Cardin (MD-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 65 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) David R Burnight Mailing Address 202 Sierra Vista Dr City El Cajon State CA Zip Code 92021-4060 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25049 Amount of Each Receipt this Period 150.00 Earmark to Robert C. Byrd (WV-00S) <b>[MEMO ITEM]</b>
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	

<b>B.</b> Full Name (Last, First, Middle Initial) David R Burnight Mailing Address 202 Sierra Vista Dr City El Cajon State CA Zip Code 92021-4060 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25050 Amount of Each Receipt this Period 100.00 Earmark to Bernie Sanders (VT-00S) <b>[MEMO ITEM]</b>
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	

<b>C.</b> Full Name (Last, First, Middle Initial) David R Burnight Mailing Address 202 Sierra Vista Dr City El Cajon State CA Zip Code 92021-4060 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25051 Amount of Each Receipt this Period 100.00 Earmark to Sherrod Brown (OH-00S) <b>[MEMO ITEM]</b>
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 66 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Rolland H Bushner		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 184 Erskine Road		Transaction ID: SA11A1.26418	
City Tyron	State NC	Amount of Each Receipt this Period 75.00	
Zip Code 28782		Earmark to Sherrod Brown (OH-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Rolland H Bushner		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 184 Erskine Road		Transaction ID: SA11A1.26419	
City Tyron	State NC	Amount of Each Receipt this Period 75.00	
Zip Code 28782		Earmark to Ned Lamont (CT-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Nina Byers		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 521 E Channel Rd		Transaction ID: SA11A1.25053	
City Santa Monica	State CA	Amount of Each Receipt this Period 25.00	
Zip Code 90402-1343		Earmark to Diane Farrell (CT-04H)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 67 / 932
	<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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

Full Name (Last, First, Middle Initial) <b>A. Gaston L Cadieux</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address PO Box 421		Transaction ID: SA11A1.25054	
City <b>Slingerlands</b>	State NY	Zip Code 12159-0421	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Earmark to Benjamin Cardin (MD-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B. Peggy Calkins</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6	
Mailing Address 6134 Vine Hill School Rd		Transaction ID: SA11A1.25056	
City <b>Sebastopol</b>	State CA	Zip Code 95472	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Earmark to Diane Farrell (CT-04H)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C. Peggy Calkins</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 3 / 2 0 0 6	
Mailing Address 6134 Vine Hill School Rd		Transaction ID: SA11A1.25057	
City <b>Sebastopol</b>	State CA	Zip Code 95472	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Earmark to John Tester (M-T-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 68 / 932
	<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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Peggy Calkins

Mailing Address 6134 Vine Hill School Rd

City State Zip Code  
Sebastopol CA 95472

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 23 / 2006

Transaction ID: SA11A1.25058

Amount of Each Receipt this Period  
50.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

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

Mailing Address PO Box 921

City State Zip Code  
N San Juan CA 95960-0921

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25059

Amount of Each Receipt this Period  
200.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Robin Carey

Mailing Address 50 Fort PI Apt B3F

City State Zip Code  
Staten Island NY 10301-2419

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.25061

Amount of Each Receipt this Period  
75.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

**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 69 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Vivian M Carlip		Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2006	
Mailing Address 408 Harvard St		Transaction ID: SA11A1.25062	
City Vestal	State NY	Zip Code 13850-2818	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Benjamin Cardin (MD-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Vivian M Carlip		Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2006	
Mailing Address 408 Harvard St		Transaction ID: SA11A1.25064	
City Vestal	State NY	Zip Code 13850-2818	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Zack Space (OH-19H)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Vivian M Carlip		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 408 Harvard St		Transaction ID: SA11A1.25063	
City Vestal	State NY	Zip Code 13850-2818	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bob Casey (PA-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 70 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Helen L Carlock Mailing Address 7729 N Ashland Ave City Chicago State IL Zip Code 60626-1133 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25066 Amount of Each Receipt this Period 50.00 Earmark to Sherrod Brown (OH-00S) <b>[MEMO ITEM]</b>
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	

<b>B.</b> Full Name (Last, First, Middle Initial) Helen L Carlock Mailing Address 7729 N Ashland Ave City Chicago State IL Zip Code 60626-1133 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25067 Amount of Each Receipt this Period 50.00 Earmark to Ned Lamont (CT-00S) <b>[MEMO ITEM]</b>
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	

<b>C.</b> Full Name (Last, First, Middle Initial) Jeff Carlock Mailing Address 1421 Ada St City Berkeley State CA Zip Code 94702-1216 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 1 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25068 Amount of Each Receipt this Period 50.00 Earmark to Diane Farrell (CT-04H) <b>[MEMO ITEM]</b>
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 71 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Jeff Carlock

Mailing Address 1421 Ada St

City State Zip Code  
Berkeley CA 94702-1216

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

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

Transaction ID: SA11A1.25069

Amount of Each Receipt this Period  
25.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Dwight W Carpenter

Mailing Address 111 Woodland Ave Apt 703

City State Zip Code  
Lexington KY 40502-6425

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.25071

Amount of Each Receipt this Period  
35.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Dwight W Carpenter

Mailing Address 111 Woodland Ave Apt 703

City State Zip Code  
Lexington KY 40502-6425

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.25072

Amount of Each Receipt this Period  
35.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 72 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Dwight W Carpenter

Mailing Address 111 Woodland Ave Apt 703

City Lexington State KY Zip Code 40502-6425

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 25 / 2006

**Transaction ID:** SA11A1.25073

Amount of Each Receipt this Period  
35.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Dwight W Carpenter

Mailing Address 111 Woodland Ave Apt 703

City Lexington State KY Zip Code 40502-6425

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 25 / 2006

**Transaction ID:** SA11A1.25074

Amount of Each Receipt this Period  
35.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Richard L Carrothers

Mailing Address 360 Tendoy St

City Bellevue State ID Zip Code 83313-5085

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 25 / 2006

**Transaction ID:** SA11A1.25075

Amount of Each Receipt this Period  
50.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... 0.00

**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 73 / 932

(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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Richard L Carrothers

Mailing Address 360 Tendoy St

City State Zip Code  
Bellevue ID 83313-5085

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	6

Transaction ID: SA11A1.25076

Amount of Each Receipt this Period  
50.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Joseph W Castello

Mailing Address 30538 Usf Holly Dr

City State Zip Code  
Tampa FL 33620-3053

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	6

Transaction ID: SA11A1.25078

Amount of Each Receipt this Period  
25.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
John Castillo

Mailing Address 18936 E. Appletree Ln

City State Zip Code  
Orange CA 92869

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25080

Amount of Each Receipt this Period  
10.00

Earmark to Zack Space (OH-19H)

**[MEMO ITEM]**

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

0.00

**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 74 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Norene O Chase

Mailing Address 405 Castleton Cir

City State Zip Code  
Tallahassee FL 32312-1405

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	6

Transaction ID: SA11A1.25082

Amount of Each Receipt this Period  
50.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

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

Mailing Address 159 Old Georgetown Rd

City State Zip Code  
Princeton NJ 08540-8612

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25083

Amount of Each Receipt this Period  
50.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Theodore Chase

Mailing Address 159 Old Georgetown Rd

City State Zip Code  
Princeton NJ 08540-8612

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25084

Amount of Each Receipt this Period  
50.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 75 / 932		
	<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

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NAME OF COMMITTEE (In Full)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Ronald S Chew

Mailing Address 512 N Ridgeland Ave

City State Zip Code  
Oak Park IL 60302-2329

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25086

Amount of Each Receipt this Period  
35.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

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

Mailing Address 4 Pleasant St

City State Zip Code  
Hanover NH 03755-2009

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25088

Amount of Each Receipt this Period  
100.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Robert W Christy

Mailing Address 4 Pleasant St

City State Zip Code  
Hanover NH 03755-2009

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25089

Amount of Each Receipt this Period  
50.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>0.00</b>
<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 76 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Robert W Christy

Mailing Address 4 Pleasant St

City State Zip Code  
Hanover NH 03755-2009

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25090

Amount of Each Receipt this Period  
50.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Bethine L Church

Mailing Address 480 N Walnut St

City State Zip Code  
Boise ID 83712-7317

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25092

Amount of Each Receipt this Period  
100.00

Earmark to Debbie Stabenow (MI-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Dorothy D Ciarlo

Mailing Address 2217 Holyoke Dr

City State Zip Code  
Boulder CO 80305-5625

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.25093

Amount of Each Receipt this Period  
100.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 77 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. Dorothy K Cinquemani</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 6	
Mailing Address 7100 Ulmerton Rd.		Transaction ID: SA11A1.25095	
City State Zip Code Largo FL 33771-5154	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Benjamin Cardin (MD-00S)	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. W. B Clapham</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6	
Mailing Address 4685 Gates East Rd		Transaction ID: SA11A1.25097	
City State Zip Code Middlefield OH 44062-9354	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Sherrod Brown (OH-00S)	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. Margaret B Cline</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6	
Mailing Address 118 Washington St Apt 1		Transaction ID: SA11A1.25099	
City State Zip Code Keene NH 03431-3104	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Ned Lamont (CT-00S)	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00		

[MEMO ITEM]

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

# 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 78 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Stephen A Coffin		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 1622 Spruce St		Transaction ID: SA11A1.25100
City Berkeley	State CA	Zip Code 94709-1616
Amount of Each Receipt this Period 100.00		Earmark to Zack Space (OH-19H)  <b>[MEMO ITEM]</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) <b>B.</b> Stephen A Coffin		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 1622 Spruce St		Transaction ID: SA11A1.25105
City Berkeley	State CA	Zip Code 94709-1616
Amount of Each Receipt this Period 100.00		Earmark to Benjamin Cardin (MD-00S)  <b>[MEMO ITEM]</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) <b>C.</b> Stephen A Coffin		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006
Mailing Address 1622 Spruce St		Transaction ID: SA11A1.25102
City Berkeley	State CA	Zip Code 94709-1616
Amount of Each Receipt this Period 50.00		Earmark to John Tester (M-T-00S)  <b>[MEMO ITEM]</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 79 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Stephen A Coffin Mailing Address 1622 Spruce St City Berkeley State CA Zip Code 94709-1616 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25103 Amount of Each Receipt this Period 50.00 Earmark to Bob Menendez (NJ-00S) <b>[MEMO ITEM]</b>
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	

<b>B.</b> Full Name (Last, First, Middle Initial) Stephen A Coffin Mailing Address 1622 Spruce St City Berkeley State CA Zip Code 94709-1616 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25104 Amount of Each Receipt this Period 50.00 Earmark to Sherrod Brown (OH-00S) <b>[MEMO ITEM]</b>
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	

<b>C.</b> Full Name (Last, First, Middle Initial) Stephen A Coffin Mailing Address 1622 Spruce St City Berkeley State CA Zip Code 94709-1616 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25101 Amount of Each Receipt this Period 50.00 Earmark to Bob Casey (PA-00S) <b>[MEMO ITEM]</b>
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 80 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Bruce S Cohen

Mailing Address 7 Ware St

City Worcester State MA Zip Code 01602-2823

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25106

Amount of Each Receipt this Period  
 25.00

Earmark to Zack Space (OH-19H)

**[MEMO ITEM]**

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

Mailing Address 2825 Shady Ave

City Pittsburgh State PA Zip Code 15217-2740

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2006

Transaction ID: SA11A1.25108

Amount of Each Receipt this Period  
 100.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Richard H Colby

Mailing Address PO Box 195

City Pomona State NJ Zip Code 08240-0195

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25109

Amount of Each Receipt this Period  
 50.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 81 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Richard H Colby

Mailing Address PO Box 195

City Pomona State NJ Zip Code 08240-0195

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25110

Amount of Each Receipt this Period  
 35.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

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

Mailing Address 5847 E Heverly Dr

City Portage State MI Zip Code 49024-1149

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25111

Amount of Each Receipt this Period  
 30.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
David Collins

Mailing Address 5847 E Heverly Dr

City Portage State MI Zip Code 49024-1149

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25112

Amount of Each Receipt this Period  
 30.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 82 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Rick Comandich

Mailing Address **4504 SE Clay St**

City **Portland** State **OR** Zip Code **97215-3153**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **.00**

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

**Transaction ID: SA11A1.25114**

Amount of Each Receipt this Period  
25.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

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

Mailing Address **4504 SE Clay St**

City **Portland** State **OR** Zip Code **97215-3153**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **.00**

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

**Transaction ID: SA11A1.25115**

Amount of Each Receipt this Period  
25.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Rick Comandich

Mailing Address **4504 SE Clay St**

City **Portland** State **OR** Zip Code **97215-3153**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **.00**

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

**Transaction ID: SA11A1.25116**

Amount of Each Receipt this Period  
25.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

**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 83 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Rick Comandich

Mailing Address 4504 SE Clay St

City State Zip Code  
Portland OR 97215-3153

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25117

Amount of Each Receipt this Period  
 25.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
George E Condoyannis

Mailing Address 5 W 95th St

City State Zip Code  
New York NY 10025-6781

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25118

Amount of Each Receipt this Period  
 25.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
George E Condoyannis

Mailing Address 5 W 95th St

City State Zip Code  
New York NY 10025-6781

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25119

Amount of Each Receipt this Period  
 25.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value=""/> <b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value=""/>

# 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 84 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Pat Conover		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 12 Wessex Rd		<b>Transaction ID:</b> SA11A1.25120	
City State Zip Code Silver Spring MD 20910-5437	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C	Earmark to Sherrod Brown (OH-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>B.</b> Full Name (Last, First, Middle Initial) Pat Conover		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 12 Wessex Rd		<b>Transaction ID:</b> SA11A1.25121	
City State Zip Code Silver Spring MD 20910-5437	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Earmark to John Tester (M-T-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>C.</b> Full Name (Last, First, Middle Initial) Colin R Cooper		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 1208 23rd St		<b>Transaction ID:</b> SA11A1.25123	
City State Zip Code Manhattan Bch CA 90266-2930	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Earmark to John Spratt (S-C-05H)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

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

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

FOR LINE NUMBER: PAGE 85 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Colin R Cooper

Mailing Address 1208 23rd St

City State Zip Code  
Manhattan Bch CA 90266-2930

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.25124

Amount of Each Receipt this Period  
100.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Colin R Cooper

Mailing Address 1208 23rd St

City State Zip Code  
Manhattan Bch CA 90266-2930

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.25125

Amount of Each Receipt this Period  
100.00

Earmark to John Salazar (CO-03H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Jerrold S Cooper

Mailing Address 3909 Canterbury Rd

City State Zip Code  
Baltimore MD 21218-1704

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

Name of Employer Occupation  
Johns Hopkins University Professor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.27571

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **250.00**

**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 86 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Edward F Corwin

Mailing Address PO Box 430

City State Zip Code  
Oak Park IL 60303-0430

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 27 / 2006

Transaction ID: SA11A1.25126

Amount of Each Receipt this Period  
35.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

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

Mailing Address 40 W 72nd St

City State Zip Code  
New York NY 10023-4119

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 28 / 2006

Transaction ID: SA11A1.27615

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Alex Craig

Mailing Address 2265 Scottwood Ave

City State Zip Code  
Toledo OH 43620-1103

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25128

Amount of Each Receipt this Period  
35.00

Earmark to Betty Sutton (OH-13H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **250.00**

**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 87 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Alex Craig  
 Mailing Address 2265 Scottwood Ave  
 City State Zip Code  
 Toledo OH 43620-1103  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 5 / 2 0 0 6  
**Transaction ID:** SA11A1.25127  
 Amount of Each Receipt this Period  
 35.00  
 Earmark to Diane Farrell (CT-04H)  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
James Creelman  
 Mailing Address 6 Alther St  
 City State Zip Code  
 Roxbury MA 02119-2904  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 1 5 / 2 0 0 6  
**Transaction ID:** SA11A1.25130  
 Amount of Each Receipt this Period  
 100.00  
 Earmark to Dan Maffei (NY-25H)  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
James Creelman  
 Mailing Address 6 Alther St  
 City State Zip Code  
 Roxbury MA 02119-2904  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 1 5 / 2 0 0 6  
**Transaction ID:** SA11A1.25131  
 Amount of Each Receipt this Period  
 100.00  
 Earmark to Benjamin Cardin (MD-00S)  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00  
**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 88 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
James Creelman

Mailing Address 6 Alther St

City State Zip Code  
Roxbury MA 02119-2904

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25132

Amount of Each Receipt this Period  
 100.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

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

Mailing Address 6 Alther St

City State Zip Code  
Roxbury MA 02119-2904

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25133

Amount of Each Receipt this Period  
 100.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
James Creelman

Mailing Address 6 Alther St

City State Zip Code  
Roxbury MA 02119-2904

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25134

Amount of Each Receipt this Period  
 100.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value=""/> <b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value=""/>



# 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 89 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> James Creelman		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 6 Alther St		Transaction ID: SA11A1.25135	
City Roxbury	State MA	Amount of Each Receipt this Period 100.00	
Zip Code 02119-2904		Earmark to Ned Lamont (CT-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> James Creelman		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 6 Alther St		Transaction ID: SA11A1.25136	
City Roxbury	State MA	Amount of Each Receipt this Period 100.00	
Zip Code 02119-2904		Earmark to Bob Menendez (NJ-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> James Creelman		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 6 Alther St		Transaction ID: SA11A1.25137	
City Roxbury	State MA	Amount of Each Receipt this Period 100.00	
Zip Code 02119-2904		Earmark to Robert C. Byrd (WV-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 90 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> James Creelman		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 6 Alther St		<b>Transaction ID:</b> SA11A1.25138	
City Roxbury	State MA	Amount of Each Receipt this Period 100.00	
Zip Code 02119-2904		Earmark to Joseph A. Sestak (PA-07H)	
FEC ID number of contributing federal political committee. C		<b>[MEMO ITEM]</b>	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> James Creelman		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 6 Alther St		<b>Transaction ID:</b> SA11A1.25139	
City Roxbury	State MA	Amount of Each Receipt this Period 100.00	
Zip Code 02119-2904		Earmark to Diane Farrell (CT-04H)	
FEC ID number of contributing federal political committee. C		<b>[MEMO ITEM]</b>	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> James Creelman		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 6 Alther St		<b>Transaction ID:</b> SA11A1.25140	
City Roxbury	State MA	Amount of Each Receipt this Period 100.00	
Zip Code 02119-2904		Earmark to Daniel Akada (HI-00S)	
FEC ID number of contributing federal political committee. C		<b>[MEMO ITEM]</b>	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 91 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
James Creelman

Mailing Address 6 Alther St

City State Zip Code  
Roxbury MA 02119-2904

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25141

Amount of Each Receipt this Period  
 100.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Betty L Crooks

Mailing Address 1451 Spruce St Apt 323

City State Zip Code  
Florence OR 97439-9682

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25143

Amount of Each Receipt this Period  
 100.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Betty L Crooks

Mailing Address 1451 Spruce St Apt 323

City State Zip Code  
Florence OR 97439-9682

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25144

Amount of Each Receipt this Period  
 50.00

Earmark to Jerry McNery (CA-11H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value=""/> 0.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 92 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Betty L Crooks

Mailing Address 1451 Spruce St Apt 323

City State Zip Code  
Florence OR 97439-9682

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25145

Amount of Each Receipt this Period  
50.00

Earmark to John Cranley (OH-01H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Betty L Crooks

Mailing Address 1451 Spruce St Apt 323

City State Zip Code  
Florence OR 97439-9682

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25147

Amount of Each Receipt this Period  
100.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Betty L Crooks

Mailing Address 1451 Spruce St Apt 323

City State Zip Code  
Florence OR 97439-9682

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25148

Amount of Each Receipt this Period  
50.00

Earmark to Patty Wetterling (MN-06H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

**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 93 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Betty L Crooks

Mailing Address 1451 Spruce St Apt 323

City State Zip Code  
Florence OR 97439-9682

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25150

Amount of Each Receipt this Period  
.....100.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Betty L Crooks

Mailing Address 1451 Spruce St Apt 323

City State Zip Code  
Florence OR 97439-9682

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25151

Amount of Each Receipt this Period  
.....50.00

Earmark to Eric Massa (NY-09H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Betty L Crooks

Mailing Address 1451 Spruce St Apt 323

City State Zip Code  
Florence OR 97439-9682

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25152

Amount of Each Receipt this Period  
.....100.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 94 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Betty L Crooks		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 1451 Spruce St Apt 323		Transaction ID: SA11A1.25153
City State Zip Code Florence OR 97439-9682	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Peter Welch (V-T-01H)  <b>[MEMO ITEM]</b>
Name of Employer Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Betty L Crooks		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 1451 Spruce St Apt 323		Transaction ID: SA11A1.25154
City State Zip Code Florence OR 97439-9682	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bob Menendez (NJ-00S)  <b>[MEMO ITEM]</b>
Name of Employer Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Betty L Crooks		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 1451 Spruce St Apt 323		Transaction ID: SA11A1.25155
City State Zip Code Florence OR 97439-9682	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Rick Larsen (W-A-02H)  <b>[MEMO ITEM]</b>
Name of Employer Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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: <span style="float: right;">PAGE 95 / 932</span> (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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

<b>A.</b> Full Name (Last, First, Middle Initial) Betty L Crooks Mailing Address 1451 Spruce St Apt 323 <hr/> City State Zip Code Florence OR 97439-9682 <hr/> FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <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>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.25146 Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>100.00</td> </tr> </table> Earmark to Sherrod Brown (OH-00S) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	5		2	0	0	6		100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	5		2	0	0	6														
	100.00																						
Name of Employer Occupation <hr/> Receipt For:    Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>.00</td> </tr> </table>		.00																					
	.00																						

<b>B.</b> Full Name (Last, First, Middle Initial) Betty L Crooks Mailing Address 1451 Spruce St Apt 323 <hr/> City State Zip Code Florence OR 97439-9682 <hr/> FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <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>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.25149 Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>100.00</td> </tr> </table> Earmark to Daniel Akada (HI-00S) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	5		2	0	0	6		100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	5		2	0	0	6														
	100.00																						
Name of Employer Occupation <hr/> Receipt For:    Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>.00</td> </tr> </table>		.00																					
	.00																						

<b>C.</b> Full Name (Last, First, Middle Initial) Betty L Crooks Mailing Address 1451 Spruce St Apt 323 <hr/> City State Zip Code Florence OR 97439-9682 <hr/> FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <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>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.25156 Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>100.00</td> </tr> </table> Earmark to Ned Lamont (CT-00S) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	5		2	0	0	6		100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	5		2	0	0	6														
	100.00																						
Name of Employer Occupation <hr/> Receipt For:    Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>.00</td> </tr> </table>		.00																					
	.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>0.00</td> </tr> </table>		0.00
	0.00		
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td></td> </tr> </table>		

**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 96 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Francis J Dance

Mailing Address 14 Cedar Ln

City Cornwall State NY Zip Code 12518-2100

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.25158

Amount of Each Receipt this Period  
 40.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Milford H Davis

Mailing Address PO Box 39

City Boulder State CO Zip Code 80306-0039

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.25159

Amount of Each Receipt this Period  
 250.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Carol S Dean

Mailing Address PO Box 398

City Chamberino State NM Zip Code 88027-0398

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.25161

Amount of Each Receipt this Period  
 50.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 97 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Carol S Dean		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address PO Box 398		Transaction ID: SA11A1.25162	
City Chamberino	State NM	Zip Code 88027-0398	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Earmark to Sherrod Brown (OH-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Dorothy G Dean		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 52 Firethorn Ln		Transaction ID: SA11A1.25164	
City Northampton	State MA	Zip Code 01060-4500	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		Earmark to Bob Casey (PA-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> David Derus		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 31 Cityview Way		Transaction ID: SA11A1.25166	
City San Francisco	State CA	Zip Code 94131-1234	Amount of Each Receipt this Period 125.00
FEC ID number of contributing federal political committee. C		Earmark to Bob Casey (PA-00S)	
Name of Employer Retired	Occupation Retired English Professor	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 98 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. David Derus</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 31 Cityview Way		Transaction ID: SA11A1.25167	
City San Francisco	State CA	Amount of Each Receipt this Period 125.00	
Zip Code 94131-1234		Earmark to John Tester (M-T-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer Retired	Occupation Retired English Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B. David Derus</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 31 Cityview Way		Transaction ID: SA11A1.27595	
City San Francisco	State CA	Amount of Each Receipt this Period 125.00	
Zip Code 94131-1234			
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired English Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Mary N deVall</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 947 6th St Apt F		Transaction ID: SA11A1.25169	
City Santa Monica	State CA	Amount of Each Receipt this Period 25.00	
Zip Code 90403-2721		Earmark to Bernie Sanders (VT-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	125.00
<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 99 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
E Diamond

Mailing Address 1825 Albany Ave

City State Zip Code  
Brooklyn NY 11210-4427

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25170

Amount of Each Receipt this Period  
1.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

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

Mailing Address 1601 Honfleur Dr

City State Zip Code  
Sunnyvale CA 94087-5207

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 27 / 2006

Transaction ID: SA11A1.25172

Amount of Each Receipt this Period  
50.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Leonard Doberne

Mailing Address 1601 Honfleur Dr

City State Zip Code  
Sunnyvale CA 94087-5207

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 27 / 2006

Transaction ID: SA11A1.25173

Amount of Each Receipt this Period  
50.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 100 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Leonard Doberne

Mailing Address 1601 Honfleur Dr

City State Zip Code  
Sunnyvale CA 94087-5207

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.25174

Amount of Each Receipt this Period  
.....50.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

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

Mailing Address 1601 Honfleur Dr

City State Zip Code  
Sunnyvale CA 94087-5207

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.25175

Amount of Each Receipt this Period  
.....50.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Leonard Doberne

Mailing Address 1601 Honfleur Dr

City State Zip Code  
Sunnyvale CA 94087-5207

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.25176

Amount of Each Receipt this Period  
.....50.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 101 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Leonard Doberne

Mailing Address 1601 Honfleur Dr

City State Zip Code  
Sunnyvale CA 94087-5207

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.25177

Amount of Each Receipt this Period  
.....50.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

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

Mailing Address 1601 Honfleur Dr

City State Zip Code  
Sunnyvale CA 94087-5207

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.25178

Amount of Each Receipt this Period  
.....50.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Leonard Doberne

Mailing Address 1601 Honfleur Dr

City State Zip Code  
Sunnyvale CA 94087-5207

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.25179

Amount of Each Receipt this Period  
.....50.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 102 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Richard Doberstein

Mailing Address 815 Optimo Ave

City State Zip Code  
Fremont CA 94539-3769

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.25181

Amount of Each Receipt this Period  
50.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Sarah C Doering

Mailing Address 83 Bancroft Rd

City State Zip Code  
Northampton MA 01060-2108

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25182

Amount of Each Receipt this Period  
250.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Sarah C Doering

Mailing Address 83 Bancroft Rd

City State Zip Code  
Northampton MA 01060-2108

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25183

Amount of Each Receipt this Period  
250.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 103 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Sarah C Doering

Mailing Address 83 Bancroft Rd

City Northampton State MA Zip Code 01060-2108

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	6

Transaction ID: SA11A1.25184

Amount of Each Receipt this Period  
250.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Sarah C Doering

Mailing Address 83 Bancroft Rd

City Northampton State MA Zip Code 01060-2108

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	6

Transaction ID: SA11A1.25185

Amount of Each Receipt this Period  
250.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Arthur A Dole

Mailing Address 53 River Field Rd

City Trenton State ME Zip Code 04605-5901

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	6

Transaction ID: SA11A1.25186

Amount of Each Receipt this Period  
10.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 104 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Robert W Donald

Mailing Address 90 Suffolk Ave

City State Zip Code  
Pawtucket RI 02861-2141

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 15 / 2006

Transaction ID: SA11A1.25187

Amount of Each Receipt this Period  
27.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Bruce A Drew

Mailing Address 4425 Abbott Ave S

City State Zip Code  
Minneapolis MN 55410-1444

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 16 / 2006

Transaction ID: SA11A1.25188

Amount of Each Receipt this Period  
25.00

Earmark to Zack Space (OH-19H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Bruce A Drew

Mailing Address 4425 Abbott Ave S

City State Zip Code  
Minneapolis MN 55410-1444

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 16 / 2006

Transaction ID: SA11A1.25189

Amount of Each Receipt this Period  
25.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 105 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Martin J Dreyfuss		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 131 Embarcadero W Apt 3114		Transaction ID: SA11A1.27604	
City Oakland	State CA	Zip Code 94607-3767	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Charles F Driscoll		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 6620 Red Deer St		Transaction ID: SA11A1.25190	
City San Diego	State CA	Zip Code 92122-2527	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		
		Earmark to Bernie Sanders (VT-00S) <b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>C.</b> Charles F Driscoll		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 6620 Red Deer St		Transaction ID: SA11A1.25191	
City San Diego	State CA	Zip Code 92122-2527	Amount of Each Receipt this Period 60.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		
		Earmark to Robert C. Byrd (WV-00S) <b>[MEMO ITEM]</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	250.00
<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 106 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Charles F Driscoll Mailing Address 6620 Red Deer St City San Diego State CA Zip Code 92122-2527 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.25192 Amount of Each Receipt this Period 120.00 Earmark to Lois Murphy (P-A-06H) <b>[MEMO ITEM]</b>
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	

<b>B.</b> Full Name (Last, First, Middle Initial) Charles F Driscoll Mailing Address 6620 Red Deer St City San Diego State CA Zip Code 92122-2527 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.25193 Amount of Each Receipt this Period 100.00 Earmark to Ned Lamont (CT-00S) <b>[MEMO ITEM]</b>
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	

<b>C.</b> Full Name (Last, First, Middle Initial) Charles F Driscoll Mailing Address 6620 Red Deer St City San Diego State CA Zip Code 92122-2527 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.25194 Amount of Each Receipt this Period 120.00 Earmark to Zack Space (OH-19H) <b>[MEMO ITEM]</b>
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 107 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Charles F Driscoll

Mailing Address 6620 Red Deer St

City San Diego State CA Zip Code 92122-2527

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25195

Amount of Each Receipt this Period  
 100.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Charles F Driscoll

Mailing Address 6620 Red Deer St

City San Diego State CA Zip Code 92122-2527

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25196

Amount of Each Receipt this Period  
 100.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Charles F Driscoll

Mailing Address 6620 Red Deer St

City San Diego State CA Zip Code 92122-2527

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25197

Amount of Each Receipt this Period  
 100.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 108 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Leah S Dubinett

Mailing Address 16 Bradford Ave

City State Zip Code  
Montclair NJ 07043-1008

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25198

Amount of Each Receipt this Period  
10.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

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

Mailing Address 504 1st Ave SE

City State Zip Code  
Belfield ND 58622-7329

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	6

Transaction ID: SA11A1.25199

Amount of Each Receipt this Period  
18.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Lloyd Dumas

Mailing Address 3204 Sugarbush Dr

City State Zip Code  
Carrollton TX 75007-2927

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	6

Transaction ID: SA11A1.25200

Amount of Each Receipt this Period  
20.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 109 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Lloyd Dumas

Mailing Address 3204 Sugarbush Dr

City State Zip Code  
Carrollton TX 75007-2927

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.25201

Amount of Each Receipt this Period  
20.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

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

Mailing Address 5821 Halwyn Ave.

City State Zip Code  
Baltimore MD 21212-3712

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.25203

Amount of Each Receipt this Period  
25.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Daniel E Efner

Mailing Address 4 Plum Tree Vlg

City State Zip Code  
Beloit WI 53511-2646

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.25204

Amount of Each Receipt this Period  
25.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 110 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> William H Eger		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 174 Shelters Rd		Transaction ID: SA11A1.25206	
City Groton State MA Zip Code 01450-2218	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Nick Lampson (TX-22H)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date .00		

Full Name (Last, First, Middle Initial) <b>B.</b> William H Eger		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 174 Shelters Rd		Transaction ID: SA11A1.25207	
City Groton State MA Zip Code 01450-2218	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Lois Murphy (P-A-06H)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date .00		

Full Name (Last, First, Middle Initial) <b>C.</b> William H Eger		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 174 Shelters Rd		Transaction ID: SA11A1.25208	
City Groton State MA Zip Code 01450-2218	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Patty Wetterling (MN-06H)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	0.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 111 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
William H Eger

Mailing Address 174 Shelters Rd

City State Zip Code  
Groton MA 01450-2218

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25209

Amount of Each Receipt this Period  
10.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
William H Eger

Mailing Address 174 Shelters Rd

City State Zip Code  
Groton MA 01450-2218

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25211

Amount of Each Receipt this Period  
10.00

Earmark to Jerry McNerny (CA-11H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
William H Eger

Mailing Address 174 Shelters Rd

City State Zip Code  
Groton MA 01450-2218

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25212

Amount of Each Receipt this Period  
10.00

Earmark to Eric Massa (NY-09H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

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

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

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or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 112 / 932  
(check only one)  
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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
William H Eger

Mailing Address 174 Shelters Rd

City State Zip Code  
Groton MA 01450-2218

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25213

Amount of Each Receipt this Period  
10.00

Earmark to Francine Busby (CA-50H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
William H Eger

Mailing Address 174 Shelters Rd

City State Zip Code  
Groton MA 01450-2218

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25214

Amount of Each Receipt this Period  
10.00

Earmark to John Cranley (OH-01H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
William H Eger

Mailing Address 174 Shelters Rd

City State Zip Code  
Groton MA 01450-2218

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25215

Amount of Each Receipt this Period  
10.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 113 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
William H Eger

Mailing Address 174 Shelters Rd

City Groton State MA Zip Code 01450-2218

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25216

Amount of Each Receipt this Period  
10.00

Earmark to Kent Conrad (N-D-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
William H Eger

Mailing Address 174 Shelters Rd

City Groton State MA Zip Code 01450-2218

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25217

Amount of Each Receipt this Period  
10.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
William H Eger

Mailing Address 174 Shelters Rd

City Groton State MA Zip Code 01450-2218

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25218

Amount of Each Receipt this Period  
10.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 114 / 932		
	<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

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
William H Eger

Mailing Address 174 Shelters Rd

City Groton State MA Zip Code 01450-2218

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25219

Amount of Each Receipt this Period  
 10.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
William H Eger

Mailing Address 174 Shelters Rd

City Groton State MA Zip Code 01450-2218

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25220

Amount of Each Receipt this Period  
 10.00

Earmark to Patricia Matrid (NM-01H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
William H Eger

Mailing Address 174 Shelters Rd

City Groton State MA Zip Code 01450-2218

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25221

Amount of Each Receipt this Period  
 10.00

Earmark to Coleen Rowley (MN-02H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 115 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
William H Eger

Mailing Address 174 Shelters Rd

City Groton State MA Zip Code 01450-2218

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25222

Amount of Each Receipt this Period  
 10.00

Earmark to Bob Filner (CA-51H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
William H Eger

Mailing Address 174 Shelters Rd

City Groton State MA Zip Code 01450-2218

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25223

Amount of Each Receipt this Period  
 10.00

Earmark to Jim Matheson (UT-02H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
William H Eger

Mailing Address 174 Shelters Rd

City Groton State MA Zip Code 01450-2218

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25224

Amount of Each Receipt this Period  
 10.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 116 / 932
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> William H Eger		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 174 Shelters Rd		Transaction ID: SA11A1.25225	
City Groton	State MA	Amount of Each Receipt this Period 10.00	
Zip Code 01450-2218		Earmark to Lynn Woolsey (CA-06H)	
FEC ID number of contributing federal political committee. <b>C</b>		<b>[MEMO ITEM]</b>	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> William H Eger		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 174 Shelters Rd		Transaction ID: SA11A1.25226	
City Groton	State MA	Amount of Each Receipt this Period 10.00	
Zip Code 01450-2218		Earmark to Betty Sutton (OH-13H)	
FEC ID number of contributing federal political committee. <b>C</b>		<b>[MEMO ITEM]</b>	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> William H Eger		Date of Receipt M M / D D / Y Y Y Y Y 09 / 25 / 2006	
Mailing Address 174 Shelters Rd		Transaction ID: SA11A1.25205	
City Groton	State MA	Amount of Each Receipt this Period 15.00	
Zip Code 01450-2218		Earmark to Zack Space (OH-19H)	
FEC ID number of contributing federal political committee. <b>C</b>		<b>[MEMO ITEM]</b>	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 117 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
William H Eger

Mailing Address 174 Shelters Rd

City State Zip Code  
Groton MA 01450-2218

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

**Transaction ID:** SA11A1.25210

Amount of Each Receipt this Period  
15.00

Earmark to Julia Carson (IN-07H)

**[MEMO ITEM]**

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

Mailing Address 98 Greenwood Dr

City State Zip Code  
Millburn NJ 07041-1428

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

**Transaction ID:** SA11A1.25227

Amount of Each Receipt this Period  
50.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Cami Pelz Elbow

Mailing Address 47 Pokeberry Rdg

City State Zip Code  
Amherst MA 01002-1514

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

**Transaction ID:** SA11A1.27573

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **500.00**

**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 118 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Roselyn Elliott

Mailing Address 625 Buena Loma St

City State Zip Code  
**Altadena CA 91001-3007**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 / 15 / 2006**

**Transaction ID: SA11A1.25228**

Amount of Each Receipt this Period  
20.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

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

Mailing Address 625 Buena Loma St

City State Zip Code  
**Altadena CA 91001-3007**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 / 15 / 2006**

**Transaction ID: SA11A1.25229**

Amount of Each Receipt this Period  
20.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Roselyn Elliott

Mailing Address 625 Buena Loma St

City State Zip Code  
**Altadena CA 91001-3007**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 / 15 / 2006**

**Transaction ID: SA11A1.25230**

Amount of Each Receipt this Period  
20.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 119 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Angela Elliston

Mailing Address 656 Sunset Ln

City East Lansing State MI Zip Code 48823-3270

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.25232

Amount of Each Receipt this Period  
 25.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

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

Mailing Address 1751 Gates Ave

City Manhattan Beach State CA Zip Code 90266-7030

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.25233

Amount of Each Receipt this Period  
 10.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

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

Mailing Address 1751 Gates Ave

City Manhattan Beach State CA Zip Code 90266-7030

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.25234

Amount of Each Receipt this Period  
 10.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 120 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Joan Engelhaupt

Mailing Address 1751 Gates Ave

City State Zip Code  
**Manhattan Beach CA 90266-7030**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 / 15 / 2006**

**Transaction ID: SA11A1.25235**

Amount of Each Receipt this Period  
.....10.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

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

Mailing Address 1751 Gates Ave

City State Zip Code  
**Manhattan Beach CA 90266-7030**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 / 15 / 2006**

**Transaction ID: SA11A1.25238**

Amount of Each Receipt this Period  
.....10.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Joan Engelhaupt

Mailing Address 1751 Gates Ave

City State Zip Code  
**Manhattan Beach CA 90266-7030**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 / 15 / 2006**

**Transaction ID: SA11A1.25239**

Amount of Each Receipt this Period  
.....10.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 121 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Joan Engelhaupt		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 1751 Gates Ave		Transaction ID: SA11A1.25240	
City Manhattan Beach	State CA	Zip Code 90266-7030	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C		Earmark to Benjamin Cardin (MD-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Joan Engelhaupt		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 1751 Gates Ave		Transaction ID: SA11A1.25242	
City Manhattan Beach	State CA	Zip Code 90266-7030	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C		Earmark to Sherrod Brown (OH-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Joan Engelhaupt		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 1751 Gates Ave		Transaction ID: SA11A1.25243	
City Manhattan Beach	State CA	Zip Code 90266-7030	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C		Earmark to Ned Lamont (CT-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 122 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Joan Engelhaupt		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 1751 Gates Ave		Transaction ID: SA11A1.25236	
City Manhattan Beach	State CA	Amount of Each Receipt this Period 10.00	
Zip Code 90266-7030		Earmark to Dan Maffei (NY-25H)	
FEC ID number of contributing federal political committee. <b>C</b>		<b>[MEMO ITEM]</b>	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Joan Engelhaupt		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 1751 Gates Ave		Transaction ID: SA11A1.25237	
City Manhattan Beach	State CA	Amount of Each Receipt this Period 10.00	
Zip Code 90266-7030		Earmark to Bruce Braley (IA-01H)	
FEC ID number of contributing federal political committee. <b>C</b>		<b>[MEMO ITEM]</b>	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Joan Engelhaupt		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 1751 Gates Ave		Transaction ID: SA11A1.25241	
City Manhattan Beach	State CA	Amount of Each Receipt this Period 10.00	
Zip Code 90266-7030		Earmark to Diane Farrell (CT-04H)	
FEC ID number of contributing federal political committee. <b>C</b>		<b>[MEMO ITEM]</b>	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 123 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
David V Evans

Mailing Address 3549 S Utah St

City State Zip Code  
Arlington VA 22206-1815

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

Name of Employer Occupation  
Center for Civic Education Senior Policy Advisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 11 / 2006

Transaction ID: SA11A1.25244

Amount of Each Receipt this Period  
500.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Garold L Faber

Mailing Address 10053 Halifax St

City State Zip Code  
Ventura CA 93004-2820

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 27 / 2006

Transaction ID: SA11A1.25245

Amount of Each Receipt this Period  
50.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Garold L Faber

Mailing Address 10053 Halifax St

City State Zip Code  
Ventura CA 93004-2820

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 27 / 2006

Transaction ID: SA11A1.25246

Amount of Each Receipt this Period  
50.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 124 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Garold L Faber

Mailing Address 10053 Halifax St

City State Zip Code  
Ventura CA 93004-2820

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.25247

Amount of Each Receipt this Period  
.....50.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Garold L Faber

Mailing Address 10053 Halifax St

City State Zip Code  
Ventura CA 93004-2820

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.25248

Amount of Each Receipt this Period  
.....50.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Joyce R Farber

Mailing Address 2874 Jackson St

City State Zip Code  
San Francisco CA 94115-1146

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	6

Transaction ID: SA11A1.25250

Amount of Each Receipt this Period  
.....50.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 125 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Joyce R Farber		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 2874 Jackson St		Transaction ID: SA11A1.25251	
City State Zip Code San Francisco CA 94115-1146	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Earmark to Bob Casey (PA-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Joyce R Farber		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 2874 Jackson St		Transaction ID: SA11A1.25252	
City State Zip Code San Francisco CA 94115-1146	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Earmark to Bob Menendez (NJ-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Joyce R Farber		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 2874 Jackson St		Transaction ID: SA11A1.25253	
City State Zip Code San Francisco CA 94115-1146	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Earmark to Sherrod Brown (OH-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 126 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Joyce R Farber		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 2874 Jackson St		Transaction ID: SA11A1.25254	
City San Francisco	State CA	Amount of Each Receipt this Period 50.00	
Zip Code 94115-1146		Earmark to John Tester (M-T-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Joyce R Farber		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 2874 Jackson St		Transaction ID: SA11A1.25255	
City San Francisco	State CA	Amount of Each Receipt this Period 50.00	
Zip Code 94115-1146		Earmark to Daniel Akada (HI-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Joyce R Farber		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 2874 Jackson St		Transaction ID: SA11A1.25256	
City San Francisco	State CA	Amount of Each Receipt this Period 100.00	
Zip Code 94115-1146		Earmark to Bernie Sanders (VT-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 127 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Joyce R Farber

Mailing Address 2874 Jackson St

City State Zip Code  
San Francisco CA 94115-1146

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	6

Transaction ID: SA11A1.25257

Amount of Each Receipt this Period  
.....50.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Joyce R Farber

Mailing Address 2874 Jackson St

City State Zip Code  
San Francisco CA 94115-1146

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	6

Transaction ID: SA11A1.25258

Amount of Each Receipt this Period  
.....50.00

Earmark to Debbie Stabenow (MI-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Theodore Fautz

Mailing Address 553 N Pacific Coast Hwy # B228

City State Zip Code  
Redondo Beach CA 90277-2163

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	5	/	2	0	0	6

Transaction ID: SA11A1.25260

Amount of Each Receipt this Period  
.....35.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 128 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Gretchen S Felix

Mailing Address 9 Alumni Dr

City State Zip Code  
Orono ME 04473-3479

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25261

Amount of Each Receipt this Period  
.....25.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Gretchen S Felix

Mailing Address 9 Alumni Dr

City State Zip Code  
Orono ME 04473-3479

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25262

Amount of Each Receipt this Period  
.....25.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Gretchen S Felix

Mailing Address 9 Alumni Dr

City State Zip Code  
Orono ME 04473-3479

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25263

Amount of Each Receipt this Period  
.....25.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 129 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Gretchen S Felix

Mailing Address 9 Alumni Dr

City Orono State ME Zip Code 04473-3479

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25264

Amount of Each Receipt this Period  
 50.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Gretchen S Felix

Mailing Address 9 Alumni Dr

City Orono State ME Zip Code 04473-3479

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25265

Amount of Each Receipt this Period  
 25.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Michael K Ferber

Mailing Address 75 Sunny Oaks Ter

City Strafford State NH Zip Code 03884-6836

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 25 / 2006

Transaction ID: SA11A1.25266

Amount of Each Receipt this Period  
 50.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 130 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Michael K Ferber

Mailing Address 75 Sunny Oaks Ter

City State Zip Code  
Strafford NH 03884-6836

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25267

Amount of Each Receipt this Period  
50.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
John H Ferger

Mailing Address PO Box 8

City State Zip Code  
Dryden NY 13053

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: SA11A1.25269

Amount of Each Receipt this Period  
50.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Harvey Fernbach

Mailing Address 3205 Beech St NW

City State Zip Code  
Washington DC 20015-2207

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25270

Amount of Each Receipt this Period  
30.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 131 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Harvey Fernbach

Mailing Address 3205 Beech St NW

City State Zip Code  
Washington DC 20015-2207

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25271

Amount of Each Receipt this Period  
30.00

Earmark to Julia Carson (IN-07H)

**[MEMO ITEM]**

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

Mailing Address 3205 Beech St NW

City State Zip Code  
Washington DC 20015-2207

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25272

Amount of Each Receipt this Period  
30.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Harvey Fernbach

Mailing Address 3205 Beech St NW

City State Zip Code  
Washington DC 20015-2207

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25273

Amount of Each Receipt this Period  
30.00

Earmark to Zack Space (OH-19H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 132 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Harvey Fernbach		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 3205 Beech St NW		Transaction ID: SA11A1.25274	
City Washington	State DC	Amount of Each Receipt this Period 40.00	
Zip Code 20015-2207		Earmark to Ned Lamont (CT-00S)	
FEC ID number of contributing federal political committee. <b>C</b>		<b>[MEMO ITEM]</b>	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Harvey Fernbach		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 3205 Beech St NW		Transaction ID: SA11A1.25275	
City Washington	State DC	Amount of Each Receipt this Period 40.00	
Zip Code 20015-2207		Earmark to Bob Menendez (NJ-00S)	
FEC ID number of contributing federal political committee. <b>C</b>		<b>[MEMO ITEM]</b>	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Harvey Fernbach		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 3205 Beech St NW		Transaction ID: SA11A1.25276	
City Washington	State DC	Amount of Each Receipt this Period 30.00	
Zip Code 20015-2207		Earmark to Joseph A. Sestak (PA-07H)	
FEC ID number of contributing federal political committee. <b>C</b>		<b>[MEMO ITEM]</b>	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 133 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. Harvey Fernbach</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 3205 Beech St NW		Transaction ID: SA11A1.25277	
City State Zip Code Washington DC 20015-2207	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Lois Murphy (P-A-06H)	
Name of Employer Occupation	[MEMO ITEM]		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B. Louise G Ferrell</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 1212 NW Alta Vista Dr		Transaction ID: SA11A1.27605	
City State Zip Code Corvallis OR 97330-2352	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Joseph A. Sestak (PA-07H)	
Name of Employer Occupation Retired Retired	[MEMO ITEM]		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Joyce F Field</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 152 Groveland Ter		Transaction ID: SA11A1.25278	
City State Zip Code Minneapolis MN 55403-1148	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Joseph A. Sestak (PA-07H)	
Name of Employer Occupation	[MEMO ITEM]		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	250.00
<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 134 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Joyce F Field		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 152 Groveland Ter		Transaction ID: SA11A1.25279	
City State Zip Code Minneapolis MN 55403-1148	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C	Earmark to Bruce Braley (IA-01H)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Joyce F Field		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 152 Groveland Ter		Transaction ID: SA11A1.25280	
City State Zip Code Minneapolis MN 55403-1148	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C	Earmark to Dan Maffei (NY-25H)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Shirley Fingerhood		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 15 W 75th St		Transaction ID: SA11A1.25281	
City State Zip Code New York NY 10023-2060	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Earmark to Benjamin Cardin (MD-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

**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 135 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Lis L Fleming

Mailing Address 1107 Halifax Ave

City State Zip Code  
Davis CA 95616-2718

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25282

Amount of Each Receipt this Period  
 25.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Lis L Fleming

Mailing Address 1107 Halifax Ave

City State Zip Code  
Davis CA 95616-2718

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25283

Amount of Each Receipt this Period  
 25.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Richard A Fluck

Mailing Address 943 W Walnut St

City State Zip Code  
Lancaster PA 17603-3118

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.25284

Amount of Each Receipt this Period  
 100.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value=""/> <b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 136 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Richard A Fluck  
Mailing Address 943 W Walnut St  
City Lancaster State PA Zip Code 17603-3118  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006  
Transaction ID: SA11A1.25285  
Amount of Each Receipt this Period  
100.00  
Earmark to Sherrod Brown (OH-00S)  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Louis Flum  
Mailing Address 7251 Solandra Ln  
City Tamarac State FL Zip Code 33321-5349  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006  
Transaction ID: SA11A1.25286  
Amount of Each Receipt this Period  
35.00  
Earmark to Sherrod Brown (OH-00S)  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Roma B. Foldy  
Mailing Address 1890 E 107th St Apt 803  
City Cleveland State OH Zip Code 44106-2245  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006  
Transaction ID: SA11A1.25287  
Amount of Each Receipt this Period  
100.00  
Earmark to Benjamin Cardin (MD-00S)  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00  
**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 137 / 932
	<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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

<b>A.</b> Full Name (Last, First, Middle Initial) Roma B. Foldy Mailing Address 1890 E 107th St Apt 803 City Cleveland State OH Zip Code 44106-2245 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006 <b>Transaction ID: SA11A1.25288</b> Amount of Each Receipt this Period 200.00 Earmark to Ned Lamont (CT-00S) <b>[MEMO ITEM]</b>
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>B.</b> Full Name (Last, First, Middle Initial) Roma B. Foldy Mailing Address 1890 E 107th St Apt 803 City Cleveland State OH Zip Code 44106-2245 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006 <b>Transaction ID: SA11A1.25289</b> Amount of Each Receipt this Period 100.00 Earmark to John Tester (M-T-00S) <b>[MEMO ITEM]</b>
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>C.</b> Full Name (Last, First, Middle Initial) Roma B. Foldy Mailing Address 1890 E 107th St Apt 803 City Cleveland State OH Zip Code 44106-2245 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006 <b>Transaction ID: SA11A1.25290</b> Amount of Each Receipt this Period 100.00 Earmark to Bob Menendez (NJ-00S) <b>[MEMO ITEM]</b>
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>0.00</b>
<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 138 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Roma B. Foldy

Mailing Address 1890 E 107th St Apt 803

City Cleveland State OH Zip Code 44106-2245

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 15 / 2006

Transaction ID: SA11A1.25291

Amount of Each Receipt this Period  
250.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

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

Mailing Address Star Route Box 60

City woodside State CA Zip Code 94062

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 15 / 2006

Transaction ID: SA11A1.25293

Amount of Each Receipt this Period  
10.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Ernest Frank

Mailing Address 34 Morningside Rd

City Colonia State NJ Zip Code 07067-1108

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 15 / 2006

Transaction ID: SA11A1.25295

Amount of Each Receipt this Period  
35.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

**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 139 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Naomi C Franklin

Mailing Address 1411 Utah St Apt 4

City State Zip Code  
Salt Lake City UT 84104-3415

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25296

Amount of Each Receipt this Period  
300.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Naomi C Franklin

Mailing Address 1411 Utah St Apt 4

City State Zip Code  
Salt Lake City UT 84104-3415

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25297

Amount of Each Receipt this Period  
200.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Naomi C Franklin

Mailing Address 1411 Utah St Apt 4

City State Zip Code  
Salt Lake City UT 84104-3415

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25298

Amount of Each Receipt this Period  
400.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 140 / 932
	<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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

<b>A.</b> Full Name (Last, First, Middle Initial) Naomi C Franklin Mailing Address 1411 Utah St Apt 4 City State Zip Code <b>Salt Lake City UT 84104-3415</b> FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <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>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.25299 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">400.00</td> </tr> </table> Earmark to Benjamin Cardin (MD-00S) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0	6	400.00	
M	M	/	D	D	/	Y	Y	Y	Y															
0	9		1	5		2	0	0	6															
400.00																								
Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <table border="1"> <tr> <td colspan="2">.00</td> </tr> </table>		.00																						
.00																								

<b>B.</b> Full Name (Last, First, Middle Initial) David C Freeman Mailing Address 26 Stoneybrook Rd City State Zip Code <b>Sherborn MA 01770-1416</b> FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <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>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.25300 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">50.00</td> </tr> </table> Earmark to Joseph A. Sestak (PA-07H) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	5		2	0	0	6	50.00	
M	M	/	D	D	/	Y	Y	Y	Y															
0	9		2	5		2	0	0	6															
50.00																								
Name of Employer Occupation  Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <table border="1"> <tr> <td colspan="2">.00</td> </tr> </table>		.00																						
.00																								

<b>C.</b> Full Name (Last, First, Middle Initial) Robert S Freeman Mailing Address 2650 Portland St City State Zip Code <b>Eugene OR 97405-3129</b> FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <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>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.25301 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">50.00</td> </tr> </table> Earmark to Diane Farrell (CT-04H) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	7		2	0	0	6	50.00	
M	M	/	D	D	/	Y	Y	Y	Y															
0	9		2	7		2	0	0	6															
50.00																								
Name of Employer Occupation  Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <table border="1"> <tr> <td colspan="2">.00</td> </tr> </table>		.00																						
.00																								

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>0.00</b>
<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 141 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

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

Mailing Address 2650 Portland St

City Eugene State OR Zip Code 97405-3129

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.25302

Amount of Each Receipt this Period  
50.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Anne W Gale

Mailing Address 19 Cambridge Ln

City Chambersburg State PA Zip Code 17201-4804

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25303

Amount of Each Receipt this Period  
35.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
David Galin

Mailing Address 5 Mount Hood Ct.

City San Rafael State CA Zip Code 94903-1018

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 05 / 2006

Transaction ID: SA11A1.25305

Amount of Each Receipt this Period  
150.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 142 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Steve Gallant Mailing Address 49 Fenno St City Cambridge State MA Zip Code 02138-6737 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.25307 Amount of Each Receipt this Period 50.00 Earmark to Daniel Akada (HI-00S) <b>[MEMO ITEM]</b>
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>B.</b> Full Name (Last, First, Middle Initial) Steve Gallant Mailing Address 49 Fenno St City Cambridge State MA Zip Code 02138-6737 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.25308 Amount of Each Receipt this Period 50.00 Earmark to John Tester (M-T-00S) <b>[MEMO ITEM]</b>
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>C.</b> Full Name (Last, First, Middle Initial) Steve Gallant Mailing Address 49 Fenno St City Cambridge State MA Zip Code 02138-6737 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.25309 Amount of Each Receipt this Period 50.00 Earmark to Bernie Sanders (VT-00S) <b>[MEMO ITEM]</b>
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 143 / 932
	<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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

Full Name (Last, First, Middle Initial) <b>A. Steve Gallant</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2006	
Mailing Address 49 Fenno St		<b>Transaction ID: SA11A1.25306</b>	
City <b>Cambridge</b>	State <b>MA</b>	Zip Code <b>02138-6737</b>	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bob Casey (PA-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B. Sheryl Gardner</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 06 / 2006	
Mailing Address 95-356 Nape Pl		<b>Transaction ID: SA11A1.25311</b>	
City <b>Mililani</b>	State <b>HI</b>	Zip Code <b>96789-1878</b>	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bob Menendez (NJ-00S)	
Name of Employer Self-employed	Occupation Physician	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C. Sheryl Gardner</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 06 / 2006	
Mailing Address 95-356 Nape Pl		<b>Transaction ID: SA11A1.25313</b>	
City <b>Mililani</b>	State <b>HI</b>	Zip Code <b>96789-1878</b>	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Daniel Akada (HI-00S)	
Name of Employer Self-employed	Occupation Physician	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 144 / 932
<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Sheryl Gardner Mailing Address 95-356 Nape Pl City Mililani State HI Zip Code 96789-1878 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25315 Amount of Each Receipt this Period 500.00 Earmark to Sherrod Brown (OH-00S) <b>[MEMO ITEM]</b>
Name of Employer Self-employed Occupation Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>B.</b> Full Name (Last, First, Middle Initial) Sheryl Gardner Mailing Address 95-356 Nape Pl City Mililani State HI Zip Code 96789-1878 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25316 Amount of Each Receipt this Period 200.00 Earmark to John Tester (M-T-00S) <b>[MEMO ITEM]</b>
Name of Employer Self-employed Occupation Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>C.</b> Full Name (Last, First, Middle Initial) Sheryl Gardner Mailing Address 95-356 Nape Pl City Mililani State HI Zip Code 96789-1878 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25312 Amount of Each Receipt this Period 300.00 Earmark to Bob Casey (PA-00S) <b>[MEMO ITEM]</b>
Name of Employer Self-employed Occupation Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 145 / 932
	<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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

<b>A.</b> Full Name (Last, First, Middle Initial) Sheryl Gardner Mailing Address 95-356 Nape Pl City Mililani State HI Zip Code 96789-1878 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID: SA11A1.25314</b> Amount of Each Receipt this Period 200.00 Earmark to Benjamin Cardin (MD-00S) <b>[MEMO ITEM]</b>
Name of Employer Self-employed Occupation Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

<b>B.</b> Full Name (Last, First, Middle Initial) John B Garner Mailing Address 302 Francis St City Jackson State MS Zip Code 39206-4128 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID: SA11A1.25318</b> Amount of Each Receipt this Period 50.00 Earmark to John Tester (M-T-00S) <b>[MEMO ITEM]</b>
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

<b>C.</b> Full Name (Last, First, Middle Initial) John E Gaustad Mailing Address 20 Ward Ave City Northampton State MA Zip Code 01060-2821 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID: SA11A1.25319</b> Amount of Each Receipt this Period 200.00 Earmark to Bernie Sanders (VT-00S) <b>[MEMO ITEM]</b>
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>0.00</b>
<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 146 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Marcia T Gedanken

Mailing Address 850 N El Camino Real Apt 341

City San Mateo State CA Zip Code 94401-5605

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 25 / 2006

Transaction ID: SA11A1.25320

Amount of Each Receipt this Period  
 35.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Winifred M Gegg

Mailing Address 11627 N 41st St

City Phoenix State AZ Zip Code 85028-2200

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 27 / 2006

Transaction ID: SA11A1.25322

Amount of Each Receipt this Period  
 35.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Sol L Gerstenfeld

Mailing Address PO Box 140326

City Anchorage State AK Zip Code 99514-0326

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25323

Amount of Each Receipt this Period  
 10.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 147 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Sol L Gerstenfeld

Mailing Address PO Box 140326

City State Zip Code  
Anchorage AK 99514-0326

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25324

Amount of Each Receipt this Period  
10.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Sol L Gerstenfeld

Mailing Address PO Box 140326

City State Zip Code  
Anchorage AK 99514-0326

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25325

Amount of Each Receipt this Period  
10.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Sol L Gerstenfeld

Mailing Address PO Box 140326

City State Zip Code  
Anchorage AK 99514-0326

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25326

Amount of Each Receipt this Period  
10.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 148 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Sol L Gerstenfeld

Mailing Address PO Box 140326

City Anchorage State AK Zip Code 99514-0326

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25327

Amount of Each Receipt this Period  
 10.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Sol L Gerstenfeld

Mailing Address PO Box 140326

City Anchorage State AK Zip Code 99514-0326

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25328

Amount of Each Receipt this Period  
 10.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Sol L Gerstenfeld

Mailing Address PO Box 140326

City Anchorage State AK Zip Code 99514-0326

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25329

Amount of Each Receipt this Period  
 10.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 149 / 932		
	<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

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Sol L Gerstenfeld

Mailing Address PO Box 140326

City Anchorage State AK Zip Code 99514-0326

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.25330

Amount of Each Receipt this Period  
 10.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Harry H Gesner

Mailing Address 33604 Pacific Coast Hwy

City Malibu State CA Zip Code 90265-2311

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.25332

Amount of Each Receipt this Period  
 25.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Harry H Gesner

Mailing Address 33604 Pacific Coast Hwy

City Malibu State CA Zip Code 90265-2311

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.25333

Amount of Each Receipt this Period  
 25.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

**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 150 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Rosemarie M Giamalis		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 858 Rorke Way		<b>Transaction ID:</b> SA11A1.27587	
City State Zip Code Palo Alto CA 94303-4409	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Information Requested Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Jonathan C Gibson		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 2202 Keiffer Rd		<b>Transaction ID:</b> SA11A1.25335	
City State Zip Code Shrewsbury VT 05738-9651	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation		Earmark to Peter Welch (V-T-01H)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ .00	

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial) <b>C.</b> Robert R Giunta		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 3347 14th St Apt 11B		<b>Transaction ID:</b> SA11A1.25337	
City State Zip Code Astoria NY 11106-4660	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation		Earmark to Ned Lamont (CT-00S)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ .00	

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	250.00
<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 151 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Lois E Goldberg

Mailing Address 608 Troy Dr

City State Zip Code  
Steubenville OH 43953-3332

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25339

Amount of Each Receipt this Period  
5.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Lois E Goldberg

Mailing Address 608 Troy Dr

City State Zip Code  
Steubenville OH 43953-3332

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25340

Amount of Each Receipt this Period  
4.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Lois E Goldberg

Mailing Address 608 Troy Dr

City State Zip Code  
Steubenville OH 43953-3332

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25341

Amount of Each Receipt this Period  
4.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 152 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Lois E Goldberg		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 608 Troy Dr		Transaction ID: SA11A1.25342	
City State Zip Code Steubenville OH 43953-3332	Amount of Each Receipt this Period 5.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Ned Lamont (CT-00S)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Lois E Goldberg		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 608 Troy Dr		Transaction ID: SA11A1.25343	
City State Zip Code Steubenville OH 43953-3332	Amount of Each Receipt this Period 5.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Benjamin Cardin (MD-00S)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Lois E Goldberg		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 608 Troy Dr		Transaction ID: SA11A1.25344	
City State Zip Code Steubenville OH 43953-3332	Amount of Each Receipt this Period 5.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to John Tester (M-T-00S)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 153 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Lois E Goldberg		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 608 Troy Dr		Transaction ID: SA11A1.25345	
City State Zip Code Steubenville OH 43953-3332	Amount of Each Receipt this Period 4.00		
FEC ID number of contributing federal political committee. C	Earmark to Bernie Sanders (VT-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Lois E Goldberg		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 608 Troy Dr		Transaction ID: SA11A1.25346	
City State Zip Code Steubenville OH 43953-3332	Amount of Each Receipt this Period 4.00		
FEC ID number of contributing federal political committee. C	Earmark to Sherrod Brown (OH-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Dora B Goldstein		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 735 Dolores St		Transaction ID: SA11A1.25348	
City State Zip Code Stanford CA 94305-8427	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Earmark to Bob Casey (PA-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

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

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

FOR LINE NUMBER: PAGE 154 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

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

Mailing Address 2181 Ambleside Dr

City State Zip Code  
Cleveland OH 44106-7602

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25350

Amount of Each Receipt this Period  
25.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

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

Mailing Address 41 Kingsland Ter

City State Zip Code  
Burlington VT 05401-5501

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25351

Amount of Each Receipt this Period  
200.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Arnold Golodetz

Mailing Address 41 Kingsland Ter

City State Zip Code  
Burlington VT 05401-5501

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25352

Amount of Each Receipt this Period  
200.00

Earmark to Lois Murphy (P-A-06H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 155 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Arnold Golodetz

Mailing Address 41 Kingsland Ter

City State Zip Code  
Burlington VT 05401-5501

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25353

Amount of Each Receipt this Period  
200.00

Earmark to Zack Space (OH-19H)

**[MEMO ITEM]**

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

Mailing Address 41 Kingsland Ter

City State Zip Code  
Burlington VT 05401-5501

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25354

Amount of Each Receipt this Period  
200.00

Earmark to Julia Carson (IN-07H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Arnold Golodetz

Mailing Address 41 Kingsland Ter

City State Zip Code  
Burlington VT 05401-5501

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25355

Amount of Each Receipt this Period  
200.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 156 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Arnold Golodetz

Mailing Address 41 Kingsland Ter

City State Zip Code  
Burlington VT 05401-5501

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25356

Amount of Each Receipt this Period  
200.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Joan E Goody

Mailing Address 70 River St

City State Zip Code  
Boston MA 02108-1125

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 27 / 2006

Transaction ID: SA11A1.25358

Amount of Each Receipt this Period  
200.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

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

Mailing Address 6720 Century Ave Apt 301

City State Zip Code  
Middleton WI 53562-1784

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 27 / 2006

Transaction ID: SA11A1.25359

Amount of Each Receipt this Period  
50.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 157 / 932
	<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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Harvey Gould

Mailing Address 35 Saxon Rd

City Worcester State MA Zip Code 01602-1544

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2006

**Transaction ID:** SA11A1.25360

Amount of Each Receipt this Period  
 35.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

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

Mailing Address 4074 S. Pine Center St

City West Bloomfield State MI Zip Code 48323

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 14 / 2006

**Transaction ID:** SA11A1.25362

Amount of Each Receipt this Period  
 50.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Evelyn Grandinetti

Mailing Address 1027 Kenbridge Ct

City Sunnyvale State CA Zip Code 94087-6104

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 04 / 2006

**Transaction ID:** SA11A1.25363

Amount of Each Receipt this Period  
 50.00

Earmark to Lois Murphy (P-A-06H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 158 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Evelyn Grandinetti

Mailing Address 1027 Kenbridge Ct

City State Zip Code  
**Sunnyvale CA 94087-6104**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
09 / 04 / 2006

**Transaction ID: SA11A1.25364**

Amount of Each Receipt this Period  
50.00

Earmark to Patricia Matrid (NM-01H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Edward C Gray

Mailing Address PO Box 34

City State Zip Code  
**Waterbury Center VT 05677-0034**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
09 / 15 / 2006

**Transaction ID: SA11A1.25365**

Amount of Each Receipt this Period  
100.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Edward C Gray

Mailing Address PO Box 34

City State Zip Code  
**Waterbury Center VT 05677-0034**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
09 / 15 / 2006

**Transaction ID: SA11A1.25366**

Amount of Each Receipt this Period  
100.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... 0.00

**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 159 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Gibson Gray

Mailing Address 3630 Kale Dr

City State Zip Code  
**Lumberton NC 28358-7707**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 / 15 / 2006**

**Transaction ID: SA11A1.25367**

Amount of Each Receipt this Period  
.....35.00

Earmark to Diane Farrell  
(CT-04H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
John F Green

Mailing Address 249 Oak St

City State Zip Code  
**Boiling Springs SC 29316-9755**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 / 15 / 2006**

**Transaction ID: SA11A1.25368**

Amount of Each Receipt this Period  
.....2.00

Earmark to Bruce Braley  
(IA-01H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
John F Green

Mailing Address 249 Oak St

City State Zip Code  
**Boiling Springs SC 29316-9755**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 / 15 / 2006**

**Transaction ID: SA11A1.25369**

Amount of Each Receipt this Period  
.....2.00

Earmark to Diane Farrell  
(CT-04H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	..... <b>0.00</b> .....
<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 160 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

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

Mailing Address 249 Oak St

City Boiling Springs State SC Zip Code 29316-9755

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	0	6

Transaction ID: SA11A1.25370

Amount of Each Receipt this Period  

2.00
------

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

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

Mailing Address 212 E Broadway Apt G1704

City New York State NY Zip Code 10002-5563

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	0	6

Transaction ID: SA11A1.27574

Amount of Each Receipt this Period  

150.00
--------

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

Mailing Address 1803 N Flagler Dr

City West Palm Beach State FL Zip Code 33407-6521

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	0	6

Transaction ID: SA11A1.25372

Amount of Each Receipt this Period  

25.00
-------

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<table border="1"><tr><td>150.00</td></tr></table>	150.00
150.00			
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<table border="1"><tr><td></td></tr></table>	



**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 161 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Richard Greene

Mailing Address 1803 N Flagler Dr

City State Zip Code  
West Palm Beach FL 33407-6521

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25373

Amount of Each Receipt this Period  
25.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Winifred M Gregg

Mailing Address 11627 N 41st St

City State Zip Code  
Phoenix AZ 85028-2200

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.25375

Amount of Each Receipt this Period  
35.00

Earmark to Jerry McNerny (CA-11H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
David Grewal

Mailing Address 52 Garden St Apt 49

City State Zip Code  
Cambridge MA 02138-1556

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25377

Amount of Each Receipt this Period  
100.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 162 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. David Grewal</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 25 / 2006	
Mailing Address 52 Garden St Apt 49		Transaction ID: SA11A1.25378	
City State Zip Code Cambridge MA 02138-1556	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to John Tester (M-T-00S)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B. David Grewal</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 25 / 2006	
Mailing Address 52 Garden St Apt 49		Transaction ID: SA11A1.25379	
City State Zip Code Cambridge MA 02138-1556	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Daniel Akada (HI-00S)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C. David Grewal</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 25 / 2006	
Mailing Address 52 Garden St Apt 49		Transaction ID: SA11A1.25380	
City State Zip Code Cambridge MA 02138-1556	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Ned Lamont (CT-00S)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 163 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

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

Mailing Address 52 Garden St Apt 49

City State Zip Code  
**Cambridge MA 02138-1556**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 25 2006**

**Transaction ID: SA11A1.25381**

Amount of Each Receipt this Period  
.....100.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

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

Mailing Address 52 Garden St Apt 49

City State Zip Code  
**Cambridge MA 02138-1556**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 25 2006**

**Transaction ID: SA11A1.25382**

Amount of Each Receipt this Period  
.....100.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
James J Griffin

Mailing Address PO Box 383

City State Zip Code  
**Campbell NY 14821-0383**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 15 2006**

**Transaction ID: SA11A1.25383**

Amount of Each Receipt this Period  
.....10.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 164 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Donald S Groll Mailing Address 27 Evergreen Ln City Middlebury State VT Zip Code 05753-1546 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.25384 Amount of Each Receipt this Period 500.00 Earmark to Ned Lamont (CT-00S) <b>[MEMO ITEM]</b>
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>B.</b> Full Name (Last, First, Middle Initial) Irving M Gruber Mailing Address 118 E 60th St City New York State NY Zip Code 10022-1185 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.25386 Amount of Each Receipt this Period 250.00 Earmark to Dan Maffei (NY-25H) <b>[MEMO ITEM]</b>
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>C.</b> Full Name (Last, First, Middle Initial) Harry H Haddon Mailing Address 31 Spencer Ave City Lancaster State PA Zip Code 17603-4852 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.25388 Amount of Each Receipt this Period 35.00 Earmark to Bob Casey (PA-00S) <b>[MEMO ITEM]</b>
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 165 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Rose Haig

Mailing Address 627 E Calaveras St

City State Zip Code  
**Altadena CA 91001-2330**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y  
**09 / 25 / 2006**

**Transaction ID: SA11A1.25389**

Amount of Each Receipt this Period  
.....25.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

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

Mailing Address 627 E Calaveras St

City State Zip Code  
**Altadena CA 91001-2330**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y  
**09 / 25 / 2006**

**Transaction ID: SA11A1.25390**

Amount of Each Receipt this Period  
.....25.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Rose Haig

Mailing Address 627 E Calaveras St

City State Zip Code  
**Altadena CA 91001-2330**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y  
**09 / 25 / 2006**

**Transaction ID: SA11A1.25391**

Amount of Each Receipt this Period  
.....25.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 166 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Rose Haig

Mailing Address 627 E Calaveras St

City Altadena State CA Zip Code 91001-2330

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.25392

Amount of Each Receipt this Period  
 25.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

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

Mailing Address 2605 Glacier St

City Anchorage State AK Zip Code 99508-3734

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.25394

Amount of Each Receipt this Period  
 50.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Thomas Hall

Mailing Address 1348 Sudden Valley

City Bellingham State WA Zip Code 98229

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.25396

Amount of Each Receipt this Period  
 50.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 167 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Thomas L Hall		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6
Mailing Address 1515 16th Ave		Transaction ID: SA11A1.25397
City State Zip Code San Francisco CA 94122-3524	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Diane Farrell (CT-04H)  <b>[MEMO ITEM]</b>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) <b>B.</b> Thomas L Hall		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6
Mailing Address 1515 16th Ave		Transaction ID: SA11A1.25398
City State Zip Code San Francisco CA 94122-3524	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Sherrod Brown (OH-00S)  <b>[MEMO ITEM]</b>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) <b>C.</b> Catherine B Hanafi		Date of Receipt M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address 3901 Cathedral Ave NW # 411		Transaction ID: SA11A1.25400
City State Zip Code Washington DC 20016-5214	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bob Casey (PA-00S)  <b>[MEMO ITEM]</b>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 168 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Richard Harisay

Mailing Address 5106 Victor Point Rd

City State Zip Code  
Sublimity OR 97385

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25402

Amount of Each Receipt this Period  
25.00

Earmark to Zack Space (OH-19H)

**[MEMO ITEM]**

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

Mailing Address 205 W 57th St

City State Zip Code  
New York NY 10019-2105

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25403

Amount of Each Receipt this Period  
35.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Marion P Harris

Mailing Address 11 Williams St

City State Zip Code  
Arlington MA 02476-5623

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25404

Amount of Each Receipt this Period  
50.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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: <span style="float: right;">PAGE 169 / 932</span> (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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

<b>A.</b> Full Name (Last, First, Middle Initial) Marion P Harris Mailing Address 11 Williams St City State Zip Code Arlington MA 02476-5623 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00	Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.25405 Amount of Each Receipt this Period 25.00 Earmark to Sherrod Brown (OH-00S) <b>[MEMO ITEM]</b>
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<b>B.</b> Full Name (Last, First, Middle Initial) Marion P Harris Mailing Address 11 Williams St City State Zip Code Arlington MA 02476-5623 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00	Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.25406 Amount of Each Receipt this Period 50.00 Earmark to John Tester (M-T-00S) <b>[MEMO ITEM]</b>
---	--

<b>C.</b> Full Name (Last, First, Middle Initial) Marion P Harris Mailing Address 11 Williams St City State Zip Code Arlington MA 02476-5623 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00	Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.25407 Amount of Each Receipt this Period 50.00 Earmark to Julia Carson (IN-07H) <b>[MEMO ITEM]</b>
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<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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: <span style="float: right;">PAGE 170 / 932</span> (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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

<b>A.</b> Full Name (Last, First, Middle Initial) Marion P Harris Mailing Address 11 Williams St City State Zip Code Arlington MA 02476-5623 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00	Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.25408 Amount of Each Receipt this Period 25.00 Earmark to Lois Murphy (P-A-06H) <b>[MEMO ITEM]</b>
--	--

<b>B.</b> Full Name (Last, First, Middle Initial) Marion P Harris Mailing Address 11 Williams St City State Zip Code Arlington MA 02476-5623 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00	Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.25409 Amount of Each Receipt this Period 50.00 Earmark to Daniel Akada (HI-00S) <b>[MEMO ITEM]</b>
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<b>C.</b> Full Name (Last, First, Middle Initial) Marion P Harris Mailing Address 11 Williams St City State Zip Code Arlington MA 02476-5623 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00	Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.25410 Amount of Each Receipt this Period 50.00 Earmark to Robert C. Byrd (WV-00S) <b>[MEMO ITEM]</b>
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<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 171 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Marion P Harris

Mailing Address 11 Williams St

City State Zip Code  
Arlington MA 02476-5623

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25411

Amount of Each Receipt this Period  
25.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Marion P Harris

Mailing Address 11 Williams St

City State Zip Code  
Arlington MA 02476-5623

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25412

Amount of Each Receipt this Period  
50.00

Earmark to Zack Space (OH-19H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Marion P Harris

Mailing Address 11 Williams St

City State Zip Code  
Arlington MA 02476-5623

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25413

Amount of Each Receipt this Period  
25.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

**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 172 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Marion P Harris

Mailing Address 11 Williams St

City State Zip Code  
Arlington MA 02476-5623

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25414

Amount of Each Receipt this Period  
50.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Marion P Harris

Mailing Address 11 Williams St

City State Zip Code  
Arlington MA 02476-5623

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25415

Amount of Each Receipt this Period  
25.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Julester S Haste

Mailing Address 1697 Lower Old Highway 6 Rd NW

City State Zip Code  
Oxford IA 52322-9243

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25416

Amount of Each Receipt this Period  
35.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 173 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Edwin H Hastings

Mailing Address 210 Payton Ave

City State Zip Code  
Warwick RI 02889-5133

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25417

Amount of Each Receipt this Period  
.....50.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Edwin H Hastings

Mailing Address 210 Payton Ave

City State Zip Code  
Warwick RI 02889-5133

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25418

Amount of Each Receipt this Period  
.....50.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Bruce Hawkins

Mailing Address 26 Crescent St Apt 206

City State Zip Code  
Northampton MA 01060-2188

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25420

Amount of Each Receipt this Period  
.....100.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 174 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Bruce Hawkins

Mailing Address 26 Crescent St Apt 206

City State Zip Code  
Northampton MA 01060-2188

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25421

Amount of Each Receipt this Period  
100.00

Earmark to Jerry McNerny (CA-11H)

**[MEMO ITEM]**

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

Mailing Address 26 Crescent St Apt 206

City State Zip Code  
Northampton MA 01060-2188

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25419

Amount of Each Receipt this Period  
100.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
John E Healy

Mailing Address 454 Toilsome Hill Rd

City State Zip Code  
Fairfield CT 06825-1627

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25422

Amount of Each Receipt this Period  
35.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 175 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Jenny Heinz  
Mailing Address 215 west 88 street  
City State Zip Code  
New York NY 10024  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 03 / 2006  
Transaction ID: SA11A1.25424  
Amount of Each Receipt this Period  
25.00  
Earmark to Sherrod Brown (OH-00S)  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
William F Hellmuth  
Mailing Address 3939 Walnut Ave Unit 187  
City State Zip Code  
Carmichael CA 95608-7309  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 24 / 2006  
Transaction ID: SA11A1.25425  
Amount of Each Receipt this Period  
100.00  
Earmark to John Tester (M-T-00S)  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Richard P Henighan  
Mailing Address 619 Mountain View Dr  
City State Zip Code  
Seymour TN 37865-4323  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006  
Transaction ID: SA11A1.25426  
Amount of Each Receipt this Period  
20.00  
Earmark to Patty Wetterling (MN-06H)  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00  
**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 176 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. Richard P Henighan</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 619 Mountain View Dr		Transaction ID: SA11A1.25427	
City State Zip Code Seymour TN 37865-4323	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Earmark to John Cranley (OH-01H)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B. William H Herke</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 555 Staring Ln		Transaction ID: SA11A1.25428	
City State Zip Code Baton Rouge LA 70810-2602	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C	Earmark to Bob Casey (PA-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C. Gary m Heymann</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 7497 S Elliot Ln		Transaction ID: SA11A1.25431	
City State Zip Code Tucson AZ 85747-9627	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Earmark to Dan Maffei (NY-25H)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 177 / 932</span> (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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

<p><b>A.</b> Full Name (Last, First, Middle Initial) Gary m Heymann</p> <p>Mailing Address 7497 S Elliot Ln</p> <p>City State Zip Code Tucson AZ 85747-9627</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ .....00</p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <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>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr> </table> </p> <p><b>Transaction ID:</b> SA11A1.25432</p> <p>Amount of Each Receipt this Period  <table border="1" style="width: 100%; text-align: right;"> <tr><td>.....</td><td>50.00</td></tr> </table> </p> <p>Earmark to Bruce Braley (IA-01H)</p> <p><b>[MEMO ITEM]</b></p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	5		2	0	0	6	.....	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	5		2	0	0	6														
.....	50.00																						

<p><b>B.</b> Full Name (Last, First, Middle Initial) Gary m Heymann</p> <p>Mailing Address 7497 S Elliot Ln</p> <p>City State Zip Code Tucson AZ 85747-9627</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ .....00</p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <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>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr> </table> </p> <p><b>Transaction ID:</b> SA11A1.25430</p> <p>Amount of Each Receipt this Period  <table border="1" style="width: 100%; text-align: right;"> <tr><td>.....</td><td>50.00</td></tr> </table> </p> <p>Earmark to Debbie Stabenow (MI-00S)</p> <p><b>[MEMO ITEM]</b></p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	7		2	0	0	6	.....	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	7		2	0	0	6														
.....	50.00																						

<p><b>C.</b> Full Name (Last, First, Middle Initial) Gary m Heymann</p> <p>Mailing Address 7497 S Elliot Ln</p> <p>City State Zip Code Tucson AZ 85747-9627</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ .....00</p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <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>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr> </table> </p> <p><b>Transaction ID:</b> SA11A1.25433</p> <p>Amount of Each Receipt this Period  <table border="1" style="width: 100%; text-align: right;"> <tr><td>.....</td><td>50.00</td></tr> </table> </p> <p>Earmark to Benjamin Cardin (MD-00S)</p> <p><b>[MEMO ITEM]</b></p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	7		2	0	0	6	.....	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	7		2	0	0	6														
.....	50.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<table border="1" style="width: 100%;"><tr><td>.....</td><td>0.00</td></tr></table>	.....	0.00
.....	0.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1" style="width: 100%;"><tr><td>.....</td></tr></table>	.....	
.....			

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

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

FOR LINE NUMBER: PAGE 178 / 932

(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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Gary m Heymann

Mailing Address 7497 S Elliot Ln

City Tucson State AZ Zip Code 85747-9627

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.25434

Amount of Each Receipt this Period  

50.00
-------

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

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

Mailing Address 2999 E Ocean Blvd Unit 1740

City Long Beach State CA Zip Code 90803-8239

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	6

Transaction ID: SA11A1.25436

Amount of Each Receipt this Period  

20.00
-------

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Robert A Hicks

Mailing Address 2999 E Ocean Blvd Unit 1740

City Long Beach State CA Zip Code 90803-8239

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.25435

Amount of Each Receipt this Period  

20.00
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Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

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

**0.00**

**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 179 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Robert A Hicks Mailing Address 2999 E Ocean Blvd Unit 1740 City Long Beach State CA Zip Code 90803-8239 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25437 Amount of Each Receipt this Period 20.00 Earmark to Joseph A. Sestak (PA-07H)
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>

<b>B.</b> Full Name (Last, First, Middle Initial) Robert A Hicks Mailing Address 2999 E Ocean Blvd Unit 1740 City Long Beach State CA Zip Code 90803-8239 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25438 Amount of Each Receipt this Period 20.00 Earmark to Bruce Braley (IA-01H)
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>

<b>C.</b> Full Name (Last, First, Middle Initial) Robert A Hicks Mailing Address 2999 E Ocean Blvd Unit 1740 City Long Beach State CA Zip Code 90803-8239 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25439 Amount of Each Receipt this Period 20.00 Earmark to Diane Farrell (CT-04H)
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 180 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Frank Von Hippel

Mailing Address 3 University Way

City State Zip Code  
Princeton NJ 08550-1617

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 27 / 2006

Transaction ID: SA11A1.25441

Amount of Each Receipt this Period  
200.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Henry R Hirsch

Mailing Address 707 Smallwood Rd

City State Zip Code  
Rockville MD 20850-2145

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 15 / 2006

Transaction ID: SA11A1.25442

Amount of Each Receipt this Period  
35.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Judith A Hirshberg

Mailing Address 17108 Burbank Blvd

City State Zip Code  
Encino CA 91316-1834

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 25 / 2006

Transaction ID: SA11A1.25443

Amount of Each Receipt this Period  
35.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>0.00</b>
<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 181 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
William B Hixson

Mailing Address 1114 Sunset Ln

City State Zip Code  
East Lansing MI 48823-2639

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25444

Amount of Each Receipt this Period  
100.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Willard E Hobbs

Mailing Address 515 Foxen Dr

City State Zip Code  
Santa Barbara CA 93105-2512

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25446

Amount of Each Receipt this Period  
10.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Douglas W Holdridge

Mailing Address 107 Church St

City State Zip Code  
Westwood MA 02090-3614

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25447

Amount of Each Receipt this Period  
100.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 182 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Ann Y Holland  
 Mailing Address 368 W Poppyfields Dr  
 City State Zip Code  
 Altadena CA 91001-4224  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 5 / 2 0 0 6  
**Transaction ID:** SA11A1.25449  
 Amount of Each Receipt this Period  
 20.00  
 Earmark to Ned Lamont (CT-00S)  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
David L Holmes  
 Mailing Address 228 Griffin Ave  
 City State Zip Code  
 Williamsburg VA 23185-4024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 1 5 / 2 0 0 6  
**Transaction ID:** SA11A1.25451  
 Amount of Each Receipt this Period  
 15.00  
 Earmark to Ned Lamont (CT-00S)  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Joan Holt  
 Mailing Address PO Box 1087  
 City State Zip Code  
 Truro MA 02666-1087  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 3 0 / 2 0 0 6  
**Transaction ID:** SA11A1.25452  
 Amount of Each Receipt this Period  
 50.00  
 Earmark to Bob Casey (PA-00S)  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00  
**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 183 / 932  
(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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Mary B Holt

Mailing Address 18616 N 99th Ave Apt 2027

City	State	Zip Code
Sun City	AZ	85373-1458

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

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	6

Transaction ID: SA11A1.25453

Amount of Each Receipt this Period  
 35.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

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

Mailing Address 18616 N 99th Ave Apt 2027

City	State	Zip Code
Sun City	AZ	85373-1458

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

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	6

Transaction ID: SA11A1.25454

Amount of Each Receipt this Period  
 35.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Mary B Holt

Mailing Address 18616 N 99th Ave Apt 2027

City	State	Zip Code
Sun City	AZ	85373-1458

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

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	6

Transaction ID: SA11A1.25455

Amount of Each Receipt this Period  
 35.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<input type="text" value=""/> 0.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<input type="text" value=""/>

# 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 184 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Mary B Holt		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 18616 N 99th Ave Apt 2027		Transaction ID: SA11A1.25456	
City State Zip Code Sun City AZ 85373-1458	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. C	Earmark to Joseph A. Sestak (PA-07H)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Robert R Holt		Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2006	
Mailing Address PO Box 1087		Transaction ID: SA11A1.25458	
City State Zip Code Truro MA 02666-1087	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Earmark to Robert C. Byrd (WV-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Robert R Holt		Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2006	
Mailing Address PO Box 1087		Transaction ID: SA11A1.25459	
City State Zip Code Truro MA 02666-1087	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Earmark to Debbie Stabenow (MI-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 185 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Robert R Holt Mailing Address PO Box 1087 City Truro State MA Zip Code 02666-1087 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <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>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.25460 Amount of Each Receipt this Period <table border="1"> <tr> <td>25.00</td> </tr> </table> Earmark to Kent Conrad (N-D-00S) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	4		2	0	0	6	25.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		0	4		2	0	0	6														
25.00																							
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>.00</td> </tr> </table>		.00																					
.00																							

<b>B.</b> Full Name (Last, First, Middle Initial) Robert R Holt Mailing Address PO Box 1087 City Truro State MA Zip Code 02666-1087 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <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>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.25461 Amount of Each Receipt this Period <table border="1"> <tr> <td>25.00</td> </tr> </table> Earmark to Tom Carper (DE-00S) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	4		2	0	0	6	25.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		0	4		2	0	0	6														
25.00																							
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>.00</td> </tr> </table>		.00																					
.00																							

<b>C.</b> Full Name (Last, First, Middle Initial) Robert R Holt Mailing Address PO Box 1087 City Truro State MA Zip Code 02666-1087 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <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>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.25462 Amount of Each Receipt this Period <table border="1"> <tr> <td>25.00</td> </tr> </table> Earmark to Nick Lampson (TX-22H) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	4		2	0	0	6	25.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		0	4		2	0	0	6														
25.00																							
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>.00</td> </tr> </table>		.00																					
.00																							

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>0.00</b>
<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 186 / 932  
(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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Robert R Holt

Mailing Address PO Box 1087

City Truro State MA Zip Code 02666-1087

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	0	6

Transaction ID: SA11A1.25463

Amount of Each Receipt this Period  

25.00
-------

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

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

Mailing Address PO Box 1087

City Truro State MA Zip Code 02666-1087

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	0	6

Transaction ID: SA11A1.25464

Amount of Each Receipt this Period  

25.00
-------

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Robert R Holt

Mailing Address PO Box 1087

City Truro State MA Zip Code 02666-1087

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	0	6

Transaction ID: SA11A1.25465

Amount of Each Receipt this Period  

25.00
-------

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00			
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<table border="1"><tr><td> </td></tr></table>	

**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 187 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Robert R Holt		Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2006	
Mailing Address PO Box 1087		Transaction ID: SA11A1.25466	
City Truro	State MA	Zip Code 02666-1087	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Earmark to John Tester (M-T-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Paul J Hoyer		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 2114 Spruce St		Transaction ID: SA11A1.25468	
City Philadelphia	State PA	Zip Code 19103-6596	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Earmark to Joseph A. Sestak (PA-07H)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> John Isaacs		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 2018 Pierce Mill Road, NW		Transaction ID: SA11A1.25469	
City Washington	State DC	Zip Code 20010-1023	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C		Earmark to Bob Menendez (NJ-00S)	
Name of Employer Council for a Livable World	Occupation President	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 188 / 932		
	<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

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Gail M Jacobson		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 156 Broad St		Transaction ID: SA11A1.25471	
City Sn Luis Obispo	State CA	Zip Code 93405-1708	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bernie Sanders (VT-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Andre T Jagendorf		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 455 Savage Farm Dr		Transaction ID: SA11A1.25472	
City Ithaca	State NY	Zip Code 14850-6522	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bruce Braley (IA-01H)	
Name of Employer Retired	Occupation Retired	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Andre T Jagendorf		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 455 Savage Farm Dr		Transaction ID: SA11A1.25473	
City Ithaca	State NY	Zip Code 14850-6522	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Diane Farrell (CT-04H)	
Name of Employer Retired	Occupation Retired	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 189 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Andre T Jagendorf

Mailing Address 455 Savage Farm Dr

City Ithaca State NY Zip Code 14850-6522

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 25 / 2006

Transaction ID: SA11A1.25474

Amount of Each Receipt this Period  
50.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

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

Mailing Address 23 York Ter

City Brookline State MA Zip Code 02446-2321

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 05 / 2006

Transaction ID: SA11A1.25475

Amount of Each Receipt this Period  
30.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Nancy James

Mailing Address 14 Cypress St.-184

City Santa Rosa Beach State FL Zip Code 32459

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 09 / 2006

Transaction ID: SA11A1.25480

Amount of Each Receipt this Period  
50.00

Earmark to Patricia Matrid (NM-01H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

**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 190 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Nancy James Mailing Address 14 Cypress St.-184 City Santa Rosa Beach State FL Zip Code 32459 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25481 Amount of Each Receipt this Period 50.00 Earmark to Lois Murphy (P-A-06H) <b>[MEMO ITEM]</b>
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	

<b>B.</b> Full Name (Last, First, Middle Initial) Nancy James Mailing Address 14 Cypress St.-184 City Santa Rosa Beach State FL Zip Code 32459 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25482 Amount of Each Receipt this Period 75.00 Earmark to Bob Menendez (NJ-00S) <b>[MEMO ITEM]</b>
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	

<b>C.</b> Full Name (Last, First, Middle Initial) Nancy James Mailing Address 14 Cypress St.-184 City Santa Rosa Beach State FL Zip Code 32459 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 9 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25483 Amount of Each Receipt this Period 75.00 Earmark to John Tester (M-T-00S) <b>[MEMO ITEM]</b>
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 191 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Nancy James Mailing Address 14 Cypress St.-184 City State Zip Code Santa Rosa Beach FL 32459 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 17 / 2006 Transaction ID: SA11A1.25476 Amount of Each Receipt this Period 50.00 Earmark to Joseph A. Sestak (PA-07H)
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	[MEMO ITEM]

B. Full Name (Last, First, Middle Initial) Nancy James Mailing Address 14 Cypress St.-184 City State Zip Code Santa Rosa Beach FL 32459 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 17 / 2006 Transaction ID: SA11A1.25477 Amount of Each Receipt this Period 50.00 Earmark to Bernie Sanders (VT-00S)
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	[MEMO ITEM]

C. Full Name (Last, First, Middle Initial) Nancy James Mailing Address 14 Cypress St.-184 City State Zip Code Santa Rosa Beach FL 32459 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 17 / 2006 Transaction ID: SA11A1.25478 Amount of Each Receipt this Period 50.00 Earmark to Sherrod Brown (OH-00S)
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	[MEMO ITEM]

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 192 / 932
	<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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

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

Mailing Address 14 Cypress St.-184

City State Zip Code  
**Santa Rosa Beach FL 32459**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 17 2006**

**Transaction ID: SA11A1.25479**

Amount of Each Receipt this Period  
.....50.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Wayne Thomas Jaquith

Mailing Address 19 Library Ln S

City State Zip Code  
**Sturbridge MA 01566-1093**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 27 2006**

**Transaction ID: SA11A1.25484**

Amount of Each Receipt this Period  
.....100.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Boyer Jarvis

Mailing Address 2357 Blaine Ave

City State Zip Code  
**Salt Lake City UT 84108-3034**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 25 2006**

**Transaction ID: SA11A1.25485**

Amount of Each Receipt this Period  
.....50.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	..... <b>0.00</b> .....
<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 193 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Christopher Jencks		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 3 Walker St		Transaction ID: SA11A1.25486
City State Zip Code Cambridge MA 02138-2409	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Sherrod Brown (OH-00S)  <b>[MEMO ITEM]</b>
Name of Employer Harvard University	Occupation Sociology Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) <b>B.</b> Christopher Jencks		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 3 Walker St		Transaction ID: SA11A1.25487
City State Zip Code Cambridge MA 02138-2409	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to John Tester (M-T-00S)  <b>[MEMO ITEM]</b>
Name of Employer Harvard University	Occupation Sociology Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) <b>C.</b> Christopher Jencks		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 3 Walker St		Transaction ID: SA11A1.25488
City State Zip Code Cambridge MA 02138-2409	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bob Menendez (NJ-00S)  <b>[MEMO ITEM]</b>
Name of Employer Harvard University	Occupation Sociology Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 194 / 932
<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Christopher Jencks Mailing Address 3 Walker St City State Zip Code Cambridge MA 02138-2409 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.25491 Amount of Each Receipt this Period 1000.00 Earmark to Benjamin Cardin (MD-00S) <b>[MEMO ITEM]</b>
Name of Employer Occupation Harvard University Sociology Professor Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ .00		

<b>B.</b> Full Name (Last, First, Middle Initial) Christopher Jencks Mailing Address 3 Walker St City State Zip Code Cambridge MA 02138-2409 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006 <b>Transaction ID:</b> SA11A1.25489 Amount of Each Receipt this Period 1000.00 Earmark to Bruce Braley (IA-01H) <b>[MEMO ITEM]</b>
Name of Employer Occupation Harvard University Sociology Professor Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ .00		

<b>C.</b> Full Name (Last, First, Middle Initial) Christopher Jencks Mailing Address 3 Walker St City State Zip Code Cambridge MA 02138-2409 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006 <b>Transaction ID:</b> SA11A1.25490 Amount of Each Receipt this Period 1000.00 Earmark to Diane Farrell (CT-04H) <b>[MEMO ITEM]</b>
Name of Employer Occupation Harvard University Sociology Professor Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 195 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Herdis Jensen

Mailing Address 9 7th Ave S # 966

City Hopkins State MN Zip Code 55343-7678

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.25492

Amount of Each Receipt this Period  
 25.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

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

Mailing Address 9 7th Ave S # 966

City Hopkins State MN Zip Code 55343-7678

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.25493

Amount of Each Receipt this Period  
 25.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Herdis Jensen

Mailing Address 9 7th Ave S # 966

City Hopkins State MN Zip Code 55343-7678

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.25494

Amount of Each Receipt this Period  
 25.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 196 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Herdis Jensen Mailing Address 9 7th Ave S # 966 City Hopkins State MN Zip Code 55343-7678 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25495 Amount of Each Receipt this Period 25.00 Earmark to Benjamin Cardin (MD-00S) <b>[MEMO ITEM]</b>
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	

<b>B.</b> Full Name (Last, First, Middle Initial) Herdis Jensen Mailing Address 9 7th Ave S # 966 City Hopkins State MN Zip Code 55343-7678 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25496 Amount of Each Receipt this Period 25.00 Earmark to Robert C. Byrd (WV-00S) <b>[MEMO ITEM]</b>
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	

<b>C.</b> Full Name (Last, First, Middle Initial) Kathe Jervis Mailing Address 1170 5th Avenue City New York State NY Zip Code 10029 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.26421 Amount of Each Receipt this Period 250.00 Earmark to Bob Menendez (NJ-00S) <b>[MEMO ITEM]</b>
Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 197 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Kathe Jervis

Mailing Address 1170 5th Avenue

City State Zip Code  
New York NY 10029

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 25 / 2006

Transaction ID: SA11A1.26422

Amount of Each Receipt this Period  
250.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Denise Lobeth Jindrich

Mailing Address 9 Heuters Ln

City State Zip Code  
Mill Valley CA 94941-2701

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 15 / 2006

Transaction ID: SA11A1.25497

Amount of Each Receipt this Period  
100.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Denise Lobeth Jindrich

Mailing Address 9 Heuters Ln

City State Zip Code  
Mill Valley CA 94941-2701

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 15 / 2006

Transaction ID: SA11A1.25498

Amount of Each Receipt this Period  
100.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 198 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Denise Lobeth Jindrich

Mailing Address 9 Heuters Ln

City State Zip Code  
Mill Valley CA 94941-2701

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25499

Amount of Each Receipt this Period  
100.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

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

Mailing Address 1300 Sumac Ave

City State Zip Code  
Boulder CO 80304-0806

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25500

Amount of Each Receipt this Period  
15.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Robert K Johnson

Mailing Address 230 2nd St NE

City State Zip Code  
Harmony MN 55939-8826

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25501

Amount of Each Receipt this Period  
10.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 199 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Robert K Johnson

Mailing Address 230 2nd St NE

City State Zip Code  
Harmony MN 55939-8826

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
09 / 15 / 2006

Transaction ID: SA11A1.25502

Amount of Each Receipt this Period  
10.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

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

Mailing Address 230 2nd St NE

City State Zip Code  
Harmony MN 55939-8826

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
09 / 15 / 2006

Transaction ID: SA11A1.25503

Amount of Each Receipt this Period  
10.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Robert K Johnson

Mailing Address 230 2nd St NE

City State Zip Code  
Harmony MN 55939-8826

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
09 / 15 / 2006

Transaction ID: SA11A1.25504

Amount of Each Receipt this Period  
10.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

**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 200 / 932  
(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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Roger D Johnson

Mailing Address 3839 Savannah Sq E

City Atlanta State GA Zip Code 30340-4337

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25505

Amount of Each Receipt this Period  

50.00
-------

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Roger D Johnson

Mailing Address 3839 Savannah Sq E

City Atlanta State GA Zip Code 30340-4337

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25506

Amount of Each Receipt this Period  

50.00
-------

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Roger D Johnson

Mailing Address 3839 Savannah Sq E

City Atlanta State GA Zip Code 30340-4337

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25507

Amount of Each Receipt this Period  

50.00
-------

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

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

0.00
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**TOTAL** This Period (last page this line number only) ..... ▶ 

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# 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 201 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Roger D Johnson Mailing Address 3839 Savannah Sq E City Atlanta State GA Zip Code 30340-4337 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <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>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.25508 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Earmark to Benjamin Cardin (MD-00S) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0	6	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	5		2	0	0	6														
50.00																							
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>.00</td> </tr> </table>		.00																					
.00																							

<b>B.</b> Full Name (Last, First, Middle Initial) Roger D Johnson Mailing Address 3839 Savannah Sq E City Atlanta State GA Zip Code 30340-4337 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <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>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.25509 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Earmark to Ned Lamont (CT-00S) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0	6	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	5		2	0	0	6														
50.00																							
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>.00</td> </tr> </table>		.00																					
.00																							

<b>C.</b> Full Name (Last, First, Middle Initial) Bernadette B Jones Mailing Address 43 Cherry Ln City Amherst State MA Zip Code 01002-1520 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <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>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.25510 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Earmark to Daniel Akada (HI-00S) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0	6	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	5		2	0	0	6														
50.00																							
Name of Employer Occupation Amherst Pediatrics Bookkeeper Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>.00</td> </tr> </table>		.00																					
.00																							

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00			
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<table border="1"><tr><td></td></tr></table>	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 202 / 932</span> (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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

<b>A.</b> Full Name (Last, First, Middle Initial) Bernadette B Jones Mailing Address 43 Cherry Ln City State Zip Code <b>Amherst MA 01002-1520</b> FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Amherst Pediatrics Occupation Bookkeeper Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <span style="float: right;">.00</span>	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <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>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.25511 Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>50.00</td> </tr> </table> Earmark to Robert C. Byrd (WV-00S) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0	6		50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	5		2	0	0	6														
	50.00																						

<b>B.</b> Full Name (Last, First, Middle Initial) Bernadette B Jones Mailing Address 43 Cherry Ln City State Zip Code <b>Amherst MA 01002-1520</b> FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Amherst Pediatrics Occupation Bookkeeper Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <span style="float: right;">.00</span>	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <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>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.25512 Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>50.00</td> </tr> </table> Earmark to Bob Menendez (NJ-00S) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0	6		50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	5		2	0	0	6														
	50.00																						

<b>C.</b> Full Name (Last, First, Middle Initial) Bernadette B Jones Mailing Address 43 Cherry Ln City State Zip Code <b>Amherst MA 01002-1520</b> FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Amherst Pediatrics Occupation Bookkeeper Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <span style="float: right;">.00</span>	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <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>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.25513 Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>50.00</td> </tr> </table> Earmark to Ned Lamont (CT-00S) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0	6		50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	5		2	0	0	6														
	50.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">0.00</td> </tr> </table>	0.00	
0.00			
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 80%;"></td> <td></td> </tr> </table>		

# 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 203 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Bernadette B Jones		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 43 Cherry Ln		Transaction ID: SA11A1.25514	
City Amherst	State MA	Amount of Each Receipt this Period 50.00	
Zip Code 01002-1520		Earmark to John Tester (M-T-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer Amherst Pediatrics	Occupation Bookkeeper		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Bernadette B Jones		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 43 Cherry Ln		Transaction ID: SA11A1.25515	
City Amherst	State MA	Amount of Each Receipt this Period 50.00	
Zip Code 01002-1520		Earmark to Sherrod Brown (OH-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer Amherst Pediatrics	Occupation Bookkeeper		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Bernadette B Jones		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 43 Cherry Ln		Transaction ID: SA11A1.25516	
City Amherst	State MA	Amount of Each Receipt this Period 100.00	
Zip Code 01002-1520		Earmark to Bernie Sanders (VT-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer Amherst Pediatrics	Occupation Bookkeeper		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 204 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Bernadette B Jones

Mailing Address 43 Cherry Ln

City State Zip Code  
Amherst MA 01002-1520

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

Name of Employer Amherst Pediatrics Occupation Bookkeeper

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 15 / 2006

Transaction ID: SA11A1.25517

Amount of Each Receipt this Period  
50.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Carolyn E. Jones

Mailing Address 802 W President Ave

City State Zip Code  
Greenwood MS 38930-3326

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 15 / 2006

Transaction ID: SA11A1.25518

Amount of Each Receipt this Period  
10.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Carolyn E. Jones

Mailing Address 802 W President Ave

City State Zip Code  
Greenwood MS 38930-3326

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 15 / 2006

Transaction ID: SA11A1.25519

Amount of Each Receipt this Period  
10.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

**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 205 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Carolyn E. Jones

Mailing Address 802 W President Ave

City Greenwood State MS Zip Code 38930-3326

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25520

Amount of Each Receipt this Period  
 10.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Carolyn E. Jones

Mailing Address 802 W President Ave

City Greenwood State MS Zip Code 38930-3326

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25521

Amount of Each Receipt this Period  
 10.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Carolyn E. Jones

Mailing Address 802 W President Ave

City Greenwood State MS Zip Code 38930-3326

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25522

Amount of Each Receipt this Period  
 10.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 206 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Carolyn E. Jones

Mailing Address 802 W President Ave

City Greenwood State MS Zip Code 38930-3326

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25523

Amount of Each Receipt this Period  
 10.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Carolyn E. Jones

Mailing Address 802 W President Ave

City Greenwood State MS Zip Code 38930-3326

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25524

Amount of Each Receipt this Period  
 10.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Carolyn E. Jones

Mailing Address 802 W President Ave

City Greenwood State MS Zip Code 38930-3326

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25525

Amount of Each Receipt this Period  
 10.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 207 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Ellen E Jones

Mailing Address 427 E Center St

City State Zip Code  
Manchester CT 06040-4444

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25527

Amount of Each Receipt this Period  
50.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

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

Mailing Address 217 W 21st St

City State Zip Code  
New York NY 10011-3101

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

Name of Employer Occupation  
Self-employed Artist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25528

Amount of Each Receipt this Period  
250.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Mark L Kahn

Mailing Address 15151 Ford Rd Apt 321

City State Zip Code  
Dearborn MI 48126-5027

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.25529

Amount of Each Receipt this Period  
50.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

**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: <span style="float: right;">PAGE 208 / 932</span> (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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

<b>A.</b> Full Name (Last, First, Middle Initial) Gilbert Kalish Mailing Address 838 W End Ave City State Zip Code New York NY 10025-5351 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00	Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006 <b>Transaction ID:</b> SA11A1.25530 Amount of Each Receipt this Period 50.00 Earmark to Joseph A. Sestak (PA-07H) <b>[MEMO ITEM]</b>
--	--

<b>B.</b> Full Name (Last, First, Middle Initial) Gilbert Kalish Mailing Address 838 W End Ave City State Zip Code New York NY 10025-5351 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00	Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006 <b>Transaction ID:</b> SA11A1.25531 Amount of Each Receipt this Period 50.00 Earmark to Joseph A. Sestak (PA-07H) <b>[MEMO ITEM]</b>
--	--

<b>C.</b> Full Name (Last, First, Middle Initial) Gloria S Kaplan Mailing Address 1 Pine St Apt 2603 City State Zip Code San Francisco CA 94111-5322 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00	Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.25533 Amount of Each Receipt this Period 25.00 Earmark to Ned Lamont (CT-00S) <b>[MEMO ITEM]</b>
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<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 209 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Gloria S Kaplan

Mailing Address 1 Pine St Apt 2603

City San Francisco State CA Zip Code 94111-5322

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25534

Amount of Each Receipt this Period  
 25.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Gloria S Kaplan

Mailing Address 1 Pine St Apt 2603

City San Francisco State CA Zip Code 94111-5322

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 25 / 2006

Transaction ID: SA11A1.25532

Amount of Each Receipt this Period  
 25.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Rita Reichman Karig

Mailing Address 5550 Fieldston Rd

City Bronx State NY Zip Code 10471-2521

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 25 / 2006

Transaction ID: SA11A1.25535

Amount of Each Receipt this Period  
 10.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 210 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Rita Reichman Karig  
Mailing Address 5550 Fieldston Rd  
City State Zip Code  
Bronx NY 10471-2521  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 6  
Transaction ID: SA11A1.25536  
Amount of Each Receipt this Period  
10.00  
Earmark to Diane Farrell (CT-04H)  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Rita Reichman Karig  
Mailing Address 5550 Fieldston Rd  
City State Zip Code  
Bronx NY 10471-2521  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 6  
Transaction ID: SA11A1.25537  
Amount of Each Receipt this Period  
10.00  
Earmark to Bruce Braley (IA-01H)  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Rita Reichman Karig  
Mailing Address 5550 Fieldston Rd  
City State Zip Code  
Bronx NY 10471-2521  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 6  
Transaction ID: SA11A1.25538  
Amount of Each Receipt this Period  
10.00  
Earmark to Joseph A. Sestak (PA-07H)  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00  
**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 211 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Inez L Kates Mailing Address 1720 Princess Jeanne Dr City <u>Las Cruces</u> State <u>NM</u> Zip Code <u>88001-4164</u> FEC ID number of contributing federal political committee. <u>C</u>		Date of Receipt <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>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.25539 Amount of Each Receipt this Period <table border="1"> <tr> <td>25.00</td> </tr> </table> Earmark to Joseph A. Sestak (PA-07H) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	5		2	0	0	6	25.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	5		2	0	0	6														
25.00																							
Name of Employer _____ Occupation _____ Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ _____ Aggregate Year-to-Date ▼ _____ .00																							

<b>B.</b> Full Name (Last, First, Middle Initial) Inez L Kates Mailing Address 1720 Princess Jeanne Dr City <u>Las Cruces</u> State <u>NM</u> Zip Code <u>88001-4164</u> FEC ID number of contributing federal political committee. <u>C</u>		Date of Receipt <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>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.25540 Amount of Each Receipt this Period <table border="1"> <tr> <td>25.00</td> </tr> </table> Earmark to Bruce Braley (IA-01H) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	5		2	0	0	6	25.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	5		2	0	0	6														
25.00																							
Name of Employer _____ Occupation _____ Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ _____ Aggregate Year-to-Date ▼ _____ .00																							

<b>C.</b> Full Name (Last, First, Middle Initial) Inez L Kates Mailing Address 1720 Princess Jeanne Dr City <u>Las Cruces</u> State <u>NM</u> Zip Code <u>88001-4164</u> FEC ID number of contributing federal political committee. <u>C</u>		Date of Receipt <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>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.25541 Amount of Each Receipt this Period <table border="1"> <tr> <td>25.00</td> </tr> </table> Earmark to Diane Farrell (CT-04H) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	5		2	0	0	6	25.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	5		2	0	0	6														
25.00																							
Name of Employer _____ Occupation _____ Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ _____ Aggregate Year-to-Date ▼ _____ .00																							

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00			
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<table border="1"><tr><td> </td></tr></table>	

**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 212 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Inez L Kates

Mailing Address 1720 Princess Jeanne Dr

City State Zip Code  
Las Cruces NM 88001-4164

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25542

Amount of Each Receipt this Period  
25.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Estelle D Katz

Mailing Address 365 W 28th St Apt 15F

City State Zip Code  
New York NY 10001-7915

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25543

Amount of Each Receipt this Period  
20.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Ilene Katz

Mailing Address 611 Elm St

City State Zip Code  
El Cerrito CA 94530-3120

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25544

Amount of Each Receipt this Period  
10.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 213 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Ilene Katz

Mailing Address 611 Elm St

City State Zip Code  
El Cerrito CA 94530-3120

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  
 /  /

Transaction ID: SA11A1.25545

Amount of Each Receipt this Period  
 10.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

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

Mailing Address 41 Holden St

City State Zip Code  
Cambridge MA 02138-2038

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  
 /  /

Transaction ID: SA11A1.25548

Amount of Each Receipt this Period  
 100.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Carl Kaysen

Mailing Address 41 Holden St

City State Zip Code  
Cambridge MA 02138-2038

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  
 /  /

Transaction ID: SA11A1.25549

Amount of Each Receipt this Period  
 100.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ►  **0.00**

**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 214 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Carl Kaysen

Mailing Address 41 Holden St

City State Zip Code  
Cambridge MA 02138-2038

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.25546

Amount of Each Receipt this Period  
100.00

Earmark to Nick Lampson (TX-22H)

**[MEMO ITEM]**

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

Mailing Address 41 Holden St

City State Zip Code  
Cambridge MA 02138-2038

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.25547

Amount of Each Receipt this Period  
100.00

Earmark to Eric Massa (NY-09H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Robert L Keck

Mailing Address 67 W Caracas Ave

City State Zip Code  
Hershey PA 17033-1417

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25550

Amount of Each Receipt this Period  
5.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 215 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Robert L Keck

Mailing Address 67 W Caracas Ave

City State Zip Code  
Hershey PA 17033-1417

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
09 / 15 / 2006

**Transaction ID:** SA11A1.25551

Amount of Each Receipt this Period  
5.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

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

Mailing Address 249 Chestnut Hill Rd

City State Zip Code  
Norwalk CT 06851-1412

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Paxworld Management Portfolio Manager

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
09 / 15 / 2006

**Transaction ID:** SA11A1.25552

Amount of Each Receipt this Period  
250.00

Earmark to Eric Massa (NY-09H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Diane Keefe

Mailing Address 249 Chestnut Hill Rd

City State Zip Code  
Norwalk CT 06851-1412

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Paxworld Management Portfolio Manager

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
09 / 15 / 2006

**Transaction ID:** SA11A1.25553

Amount of Each Receipt this Period  
150.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... 0.00

**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 216 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
James N Kellogg

Mailing Address **University Of South Carolina**

City **Columbia** State **SC** Zip Code **29208-0001**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **.00**

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

**Transaction ID: SA11A1.25555**

Amount of Each Receipt this Period  
35.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Jean A Kemble

Mailing Address **10 Mitchell PI**

City **New York** State **NY** Zip Code **10017-1801**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **.00**

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 1 5 / 2 0 0 6

**Transaction ID: SA11A1.25556**

Amount of Each Receipt this Period  
100.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

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

Mailing Address **10 Mitchell PI**

City **New York** State **NY** Zip Code **10017-1801**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **.00**

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 1 5 / 2 0 0 6

**Transaction ID: SA11A1.25557**

Amount of Each Receipt this Period  
100.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... 0.00

**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 217 / 932
	<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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Jean A Kemble

Mailing Address 10 Mitchell PI

City State Zip Code  
New York NY 10017-1801

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

**Transaction ID:** SA11A1.25558

Amount of Each Receipt this Period  
100.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Jean A Kemble

Mailing Address 10 Mitchell PI

City State Zip Code  
New York NY 10017-1801

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

**Transaction ID:** SA11A1.25559

Amount of Each Receipt this Period  
100.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
John F Kerridge

Mailing Address 334 El Amigo Rd

City State Zip Code  
Del Mar CA 92014-3024

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 05 / 2006

**Transaction ID:** SA11A1.25560

Amount of Each Receipt this Period  
100.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>0.00</b>
<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 218 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Charles L Kerstein

Mailing Address 257 Pomperaug Woods

City State Zip Code  
Southbury CT 06488-3801

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25561

Amount of Each Receipt this Period  
50.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Charles L Kerstein

Mailing Address 257 Pomperaug Woods

City State Zip Code  
Southbury CT 06488-3801

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25562

Amount of Each Receipt this Period  
50.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Charles L Kerstein

Mailing Address 257 Pomperaug Woods

City State Zip Code  
Southbury CT 06488-3801

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25563

Amount of Each Receipt this Period  
50.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 219 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Charles L Kerstein

Mailing Address 257 Pomperaug Woods

City State Zip Code  
Southbury CT 06488-3801

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25564

Amount of Each Receipt this Period  
.....50.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Charles L Kerstein

Mailing Address 257 Pomperaug Woods

City State Zip Code  
Southbury CT 06488-3801

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25565

Amount of Each Receipt this Period  
.....50.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Rufus D Kinney

Mailing Address 806 12th Ave NE

City State Zip Code  
Jacksonville AL 36265-1242

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.25567

Amount of Each Receipt this Period  
.....10.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	.....0.00
<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 220 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Rufus D Kinney

Mailing Address 806 12th Ave NE

City State Zip Code  
Jacksonville AL 36265-1242

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.25568

Amount of Each Receipt this Period  
10.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

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

Mailing Address 134 Martin St

City State Zip Code  
Rehoboth MA 02769-2102

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25569

Amount of Each Receipt this Period  
50.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Vera Kistiakowsky

Mailing Address 134 Martin St

City State Zip Code  
Rehoboth MA 02769-2102

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25570

Amount of Each Receipt this Period  
50.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 221 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Vera Kistiakowsky		Date of Receipt MM / DD / YYYY 09 / 25 / 2006
Mailing Address 134 Martin St		Transaction ID: SA11A1.25571
City Rehoboth	State MA	Zip Code 02769-2102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	Earmark to Diane Farrell (CT-04H)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>B.</b> Vera Kistiakowsky		Date of Receipt MM / DD / YYYY 09 / 25 / 2006
Mailing Address 134 Martin St		Transaction ID: SA11A1.25572
City Rehoboth	State MA	Zip Code 02769-2102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	Earmark to Joseph A. Sestak (PA-07H)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>C.</b> Aline Klein		Date of Receipt MM / DD / YYYY 09 / 15 / 2006
Mailing Address 2975 SE 36th St		Transaction ID: SA11A1.25573
City Ocala	State FL	Zip Code 34471-8903
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00
Name of Employer	Occupation	Earmark to Ned Lamont (CT-00S)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 222 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Aline Klein		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 2975 SE 36th St		Transaction ID: SA11A1.25574	
City State Zip Code Ocala FL 34471-8903	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. C	Earmark to Daniel Akada (HI-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Aline Klein		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 2975 SE 36th St		Transaction ID: SA11A1.25575	
City State Zip Code Ocala FL 34471-8903	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. C	Earmark to Sherrod Brown (OH-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Aline Klein		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 2975 SE 36th St		Transaction ID: SA11A1.25576	
City State Zip Code Ocala FL 34471-8903	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. C	Earmark to Robert C. Byrd (WV-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 223 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Aline Klein		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 2975 SE 36th St		Transaction ID: SA11A1.25577	
City State Zip Code Ocala FL 34471-8903	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. C	Earmark to Benjamin Cardin (MD-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Aline Klein		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 2975 SE 36th St		Transaction ID: SA11A1.25579	
City State Zip Code Ocala FL 34471-8903	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. C	Earmark to Bernie Sanders (VT-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Aline Klein		Date of Receipt M M / D D / Y Y Y Y Y 09 / 25 / 2006	
Mailing Address 2975 SE 36th St		Transaction ID: SA11A1.25578	
City State Zip Code Ocala FL 34471-8903	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. C	Earmark to Bob Menendez (NJ-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 224 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Marc Klein

Mailing Address 52 Flower Hill Rd

City State Zip Code  
Huntington NY 11743-2343

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.25581

Amount of Each Receipt this Period  
25.00

Earmark to Lynn Woolsey (CA-06H)

**[MEMO ITEM]**

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

Mailing Address 52 Flower Hill Rd

City State Zip Code  
Huntington NY 11743-2343

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.25582

Amount of Each Receipt this Period  
25.00

Earmark to John Salazar (CO-03H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Marc Klein

Mailing Address 52 Flower Hill Rd

City State Zip Code  
Huntington NY 11743-2343

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.25583

Amount of Each Receipt this Period  
25.00

Earmark to Bob Filner (CA-51H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 225 / 932
	<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	

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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Marc Klein		Date of Receipt M M / D D / Y Y Y Y 09 / 05 / 2006	
Mailing Address 52 Flower Hill Rd		<b>Transaction ID:</b> SA11A1.25584	
City State Zip Code Huntington NY 11743-2343	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C	Earmark to Bob Menendez (NJ-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>B.</b> Full Name (Last, First, Middle Initial) Marc Klein		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 52 Flower Hill Rd		<b>Transaction ID:</b> SA11A1.25585	
City State Zip Code Huntington NY 11743-2343	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C	Earmark to John Tester (M-T-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>C.</b> Full Name (Last, First, Middle Initial) William J Knight		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 1305 N Lawrence St		<b>Transaction ID:</b> SA11A1.25586	
City State Zip Code South Bend IN 46617-1312	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Earmark to Dan Maffei (NY-25H)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 226 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
William J Knight

Mailing Address 1305 N Lawrence St

City State Zip Code  
South Bend IN 46617-1312

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
09 / 25 / 2006

Transaction ID: SA11A1.25587

Amount of Each Receipt this Period  
100.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
W. Dale Knutsen

Mailing Address 1231 Page St

City State Zip Code  
San Francisco CA 94117-3025

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
09 / 27 / 2006

Transaction ID: SA11A1.25588

Amount of Each Receipt this Period  
100.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Frederic J Kottke

Mailing Address 3701 Bryant Ave S Apt 702

City State Zip Code  
Minneapolis MN 55409-1090

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
09 / 15 / 2006

Transaction ID: SA11A1.27564

Amount of Each Receipt this Period  
400.00

**SUBTOTAL** of Receipts This Page (optional) ..... 400.00

**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 227 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Dorsie R Kovacs Mailing Address 125 Palmer Rd City Monson State MA Zip Code 01057-9576 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.27576 Amount of Each Receipt this Period 250.00
Name of Employer Self employed Occupation Veterinarian Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 250.00		

<b>B.</b> Full Name (Last, First, Middle Initial) David R Krieg Mailing Address 103 Rainbow Dr Pmb 344 City Livingston State TX Zip Code 77399-0001 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006 <b>Transaction ID:</b> SA11A1.25589 Amount of Each Receipt this Period 25.00 Earmark to Zack Space (OH-19H) <b>[MEMO ITEM]</b>
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date .00		

<b>C.</b> Full Name (Last, First, Middle Initial) David R Krieg Mailing Address 103 Rainbow Dr Pmb 344 City Livingston State TX Zip Code 77399-0001 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006 <b>Transaction ID:</b> SA11A1.25590 Amount of Each Receipt this Period 25.00 Earmark to Benjamin Cardin (MD-00S) <b>[MEMO ITEM]</b>
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	250.00
<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 228 / 932  
(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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Bertha Kriegler

Mailing Address 527 Plymouth Ave

City State Zip Code  
Schenectady NY 12308-3505

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	0	6

Transaction ID: SA11A1.25591

Amount of Each Receipt this Period  
 10.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

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

Mailing Address 527 Plymouth Ave

City State Zip Code  
Schenectady NY 12308-3505

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	0	6

Transaction ID: SA11A1.25592

Amount of Each Receipt this Period  
 10.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Bertha Kriegler

Mailing Address 527 Plymouth Ave

City State Zip Code  
Schenectady NY 12308-3505

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	0	6

Transaction ID: SA11A1.25593

Amount of Each Receipt this Period  
 10.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<input type="text" value=""/> 0.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<input type="text" value=""/>

# 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 229 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Bertha Kriegler		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 527 Plymouth Ave		Transaction ID: SA11A1.25594	
City Schenectady	State NY	Amount of Each Receipt this Period 15.00	
Zip Code 12308-3505		Earmark to John Tester (M-T-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Bertha Kriegler		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 527 Plymouth Ave		Transaction ID: SA11A1.25595	
City Schenectady	State NY	Amount of Each Receipt this Period 10.00	
Zip Code 12308-3505		Earmark to Daniel Akada (HI-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Bertha Kriegler		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 527 Plymouth Ave		Transaction ID: SA11A1.25596	
City Schenectady	State NY	Amount of Each Receipt this Period 10.00	
Zip Code 12308-3505		Earmark to Bob Menendez (NJ-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 230 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Patricia Kriegler-Dols

Mailing Address PO Box 39

City State Zip Code  
**Forest Knolls CA 94933-0039**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 15 / 2006

**Transaction ID: SA11A1.25598**

Amount of Each Receipt this Period  
100.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

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

Mailing Address 326 Stanford Ave

City State Zip Code  
**Menlo Park CA 94025-6240**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 15 / 2006

**Transaction ID: SA11A1.25600**

Amount of Each Receipt this Period  
50.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Julia B Kringel

Mailing Address 326 Stanford Ave

City State Zip Code  
**Menlo Park CA 94025-6240**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 15 / 2006

**Transaction ID: SA11A1.25601**

Amount of Each Receipt this Period  
50.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... 0.00

**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 231 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Tina Kroot		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 222 Crescent Rd		Transaction ID: SA11A1.25602	
City San Anselmo	State CA	Amount of Each Receipt this Period 100.00	
Zip Code 94960-2745		Earmark to Ned Lamont (CT-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer Self employed	Occupation Architect		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Tina Kroot		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 222 Crescent Rd		Transaction ID: SA11A1.25603	
City San Anselmo	State CA	Amount of Each Receipt this Period 100.00	
Zip Code 94960-2745		Earmark to John Tester (M-T-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer Self employed	Occupation Architect		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Tina Kroot		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 222 Crescent Rd		Transaction ID: SA11A1.25604	
City San Anselmo	State CA	Amount of Each Receipt this Period 100.00	
Zip Code 94960-2745		Earmark to Bernie Sanders (VT-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer Self employed	Occupation Architect		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 232 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Tina Kroot		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 222 Crescent Rd		Transaction ID: SA11A1.25605	
City San Anselmo	State CA	Amount of Each Receipt this Period 100.00	
Zip Code 94960-2745		Earmark to Benjamin Cardin (MD-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer Self employed	Occupation Architect		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Tina Kroot		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 222 Crescent Rd		Transaction ID: SA11A1.25606	
City San Anselmo	State CA	Amount of Each Receipt this Period 100.00	
Zip Code 94960-2745		Earmark to Bruce Braley (IA-01H)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer Self employed	Occupation Architect		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Tina Kroot		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 222 Crescent Rd		Transaction ID: SA11A1.25607	
City San Anselmo	State CA	Amount of Each Receipt this Period 100.00	
Zip Code 94960-2745		Earmark to Joseph A. Sestak (PA-07H)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer Self employed	Occupation Architect		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 233 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Corinne Kurtz

Mailing Address 509 Van Cortlandt Park Ave

City State Zip Code  
Yonkers NY 10705-4203

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	0	6

Transaction ID: SA11A1.25609

Amount of Each Receipt this Period  
5.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

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

Mailing Address 509 Van Cortlandt Park Ave

City State Zip Code  
Yonkers NY 10705-4203

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	0	6

Transaction ID: SA11A1.25610

Amount of Each Receipt this Period  
15.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Corinne Kurtz

Mailing Address 509 Van Cortlandt Park Ave

City State Zip Code  
Yonkers NY 10705-4203

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	0	6

Transaction ID: SA11A1.25611

Amount of Each Receipt this Period  
10.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 234 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Corinne Kurtz		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 509 Van Cortlandt Park Ave		Transaction ID: SA11A1.25612	
City State Zip Code Yonkers NY 10705-4203	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C	Earmark to Robert C. Byrd (WV-00S)		
Name of Employer Occupation	[MEMO ITEM]		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

B. Full Name (Last, First, Middle Initial) Corinne Kurtz		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 509 Van Cortlandt Park Ave		Transaction ID: SA11A1.25613	
City State Zip Code Yonkers NY 10705-4203	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C	Earmark to Ned Lamont (CT-00S)		
Name of Employer Occupation	[MEMO ITEM]		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

C. Full Name (Last, First, Middle Initial) Corinne Kurtz		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 509 Van Cortlandt Park Ave		Transaction ID: SA11A1.25614	
City State Zip Code Yonkers NY 10705-4203	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C	Earmark to John Tester (M-T-00S)		
Name of Employer Occupation	[MEMO ITEM]		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 235 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Corinne Kurtz

Mailing Address 509 Van Cortlandt Park Ave

City State Zip Code  
Yonkers NY 10705-4203

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.25615

Amount of Each Receipt this Period  
15.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
John W Lamperti

Mailing Address Upper Loveland Rd

City State Zip Code  
Norwich VT 05055

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.26423

Amount of Each Receipt this Period  
200.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
John W Lamperti

Mailing Address Upper Loveland Rd

City State Zip Code  
Norwich VT 05055

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.26424

Amount of Each Receipt this Period  
200.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... 0.00

**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 236 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> John W Lamperti		Date of Receipt M M / D D / Y Y Y Y Y 09 / 25 / 2006	
Mailing Address Upper Loveland Rd		Transaction ID: SA11A1.26425	
City State Zip Code Norwich VT 05055	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Earmark to Diane Farrell (CT-04H)		
Name of Employer Retired Occupation Retired	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> James T Langland		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 1014 Oakland Park Rd		Transaction ID: SA11A1.25617	
City State Zip Code Thief Rvr Fls MN 56701-3912	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Earmark to John Tester (M-T-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> James T Langland		Date of Receipt M M / D D / Y Y Y Y Y 09 / 25 / 2006	
Mailing Address 1014 Oakland Park Rd		Transaction ID: SA11A1.25616	
City State Zip Code Thief Rvr Fls MN 56701-3912	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Earmark to Joseph A. Sestak (PA-07H)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

**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 237 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Mary B Langley

Mailing Address 819 Middle Tpke

City State Zip Code  
Storrs Mansfield CT 06268-1300

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.25618

Amount of Each Receipt this Period  
25.00

Earmark to Betty Sutton (OH-13H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Leonard V. Larson

Mailing Address 1304 15th Ave S

City State Zip Code  
Seattle WA 98144-3414

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 29 / 2006

Transaction ID: SA11A1.25619

Amount of Each Receipt this Period  
35.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Phillip A Lathrap

Mailing Address 835 Avalon Ave

City State Zip Code  
Lafayette CA 94549-5013

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25621

Amount of Each Receipt this Period  
250.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 238 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Victor G Laties

Mailing Address 55 Dale Rd E

City State Zip Code  
Rochester NY 14625-2137

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25622

Amount of Each Receipt this Period  
25.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

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

Mailing Address 1630 N Genesee Ave

City State Zip Code  
Los Angeles CA 90046-2721

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25624

Amount of Each Receipt this Period  
50.00

Earmark to Jerry McNerny (CA-11H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Susan Lee

Mailing Address 15826 Stags Leap Dr

City State Zip Code  
Lutz FL 33559

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 29 / 2006

Transaction ID: SA11A1.25625

Amount of Each Receipt this Period  
50.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 239 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Thomas E Leggat

Mailing Address 81 Baker Bridge Rd

City Lincoln State MA Zip Code 01773-3100

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	6

Transaction ID: SA11A1.25626

Amount of Each Receipt this Period  

100.00
--------

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

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

Mailing Address 18510 66th Avenue Northeast

City Kenmore State WA Zip Code 98028

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	6

Transaction ID: SA11A1.25627

Amount of Each Receipt this Period  

25.00
-------

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Gerson T Lesser

Mailing Address 85 E End Ave Apt 15F

City New York State NY Zip Code 10028-8023

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25628

Amount of Each Receipt this Period  

50.00
-------

Earmark to Julia Carson (IN-07H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00			
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<table border="1"><tr><td></td></tr></table>	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 240 / 932  
(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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Gerson T Lesser

Mailing Address 85 E End Ave Apt 15F

City State Zip Code  
New York NY 10028-8023

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25629

Amount of Each Receipt this Period  
50.00

Earmark to Lois Murphy (P-A-06H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Gerson T Lesser

Mailing Address 85 E End Ave Apt 15F

City State Zip Code  
New York NY 10028-8023

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25630

Amount of Each Receipt this Period  
50.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Gerson T Lesser

Mailing Address 85 E End Ave Apt 15F

City State Zip Code  
New York NY 10028-8023

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25631

Amount of Each Receipt this Period  
50.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 241 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Adam E Levine

Mailing Address 1819 E Republican St Apt 311

City State Zip Code  
Seattle WA 98112-4682

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25632

Amount of Each Receipt this Period  
15.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
John L Levy

Mailing Address 842 Autumn Ln

City State Zip Code  
Mill Valley CA 94941-3901

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25633

Amount of Each Receipt this Period  
50.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
John L Levy

Mailing Address 842 Autumn Ln

City State Zip Code  
Mill Valley CA 94941-3901

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25634

Amount of Each Receipt this Period  
50.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 242 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Everett E Lewis		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 275 7th Ave		<b>Transaction ID:</b> SA11A1.27565	
City State Zip Code New York NY 10001-6708	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Lewis Greenwald Clifton	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Everett E Lewis		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 275 7th Ave		<b>Transaction ID:</b> SA11A1.25635	
City State Zip Code New York NY 10001-6708	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Lewis Greenwald Clifton	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		
		Earmark to Dan Maffei (NY-25H) <b>[MEMO ITEM]</b>	

<b>C.</b> Full Name (Last, First, Middle Initial) Everett E Lewis		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 275 7th Ave		<b>Transaction ID:</b> SA11A1.25636	
City State Zip Code New York NY 10001-6708	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Lewis Greenwald Clifton	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		
		Earmark to Bruce Braley (IA-01H) <b>[MEMO ITEM]</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<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 243 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Everett E Lewis		Date of Receipt M M / D D / Y Y Y Y Y 09 / 25 / 2006	
Mailing Address 275 7th Ave		Transaction ID: SA11A1.25637	
City State Zip Code New York NY 10001-6708	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Joseph A. Sestak (PA-07H)	
Name of Employer Lewis Greenwald Clifton	Occupation Attorney	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Everett E Lewis		Date of Receipt M M / D D / Y Y Y Y Y 09 / 25 / 2006	
Mailing Address 275 7th Ave		Transaction ID: SA11A1.25638	
City State Zip Code New York NY 10001-6708	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Diane Farrell (CT-04H)	
Name of Employer Lewis Greenwald Clifton	Occupation Attorney	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Robert Paul Liberman		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 528 W Potrero Rd		Transaction ID: SA11A1.25639	
City State Zip Code Thousand Oaks CA 91361-5013	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to John Tester (M-T-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 244 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Lawrence M Lichtenstein		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 10245 COLLINS AVE APT 15A		<b>Transaction ID:</b> SA11A1.25641	
City State Zip Code BAL HARBOUR FL 33154-1411	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Benjamin Cardin (MD-00S)	
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00		
		<b>[MEMO ITEM]</b>	

<b>B.</b> Full Name (Last, First, Middle Initial) Elizabeth B Lindemann		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 80 Lyme Rd Apt 346		<b>Transaction ID:</b> SA11A1.25643	
City State Zip Code Hanover NH 03755-1234	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bernie Sanders (VT-00S)	
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00		
		<b>[MEMO ITEM]</b>	

<b>C.</b> Full Name (Last, First, Middle Initial) James E Lindsay		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 690 Fenelon Pl		<b>Transaction ID:</b> SA11A1.25644	
City State Zip Code Dubuque IA 52001-6633	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Diane Farrell (CT-04H)	
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00		
		<b>[MEMO ITEM]</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 245 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. Michael Litt</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2006	
Mailing Address 92 Wheatherstone		Transaction ID: SA11A1.25646	
City Lake Oswego	State OR	Zip Code 97035-1956	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Earmark to Bob Menendez (NJ-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B. Michael Litt</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2006	
Mailing Address 92 Wheatherstone		Transaction ID: SA11A1.25645	
City Lake Oswego	State OR	Zip Code 97035-1956	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Earmark to Joseph A. Sestak (PA-07H)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C. Michael Litt</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2006	
Mailing Address 92 Wheatherstone		Transaction ID: SA11A1.25648	
City Lake Oswego	State OR	Zip Code 97035-1956	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Earmark to Diane Farrell (CT-04H)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 246 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

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

Mailing Address 92 Wheatherstone

City Lake Oswego State OR Zip Code 97035-1956

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2006

Transaction ID: SA11A1.25647

Amount of Each Receipt this Period  
 100.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Aase A Loescher

Mailing Address 2661 E Fair Oaks Ln

City Bloomington State IN Zip Code 47401-6134

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25649

Amount of Each Receipt this Period  
 80.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Aase A Loescher

Mailing Address 2661 E Fair Oaks Ln

City Bloomington State IN Zip Code 47401-6134

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25651

Amount of Each Receipt this Period  
 80.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 247 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Aase A Loescher

Mailing Address 2661 E Fair Oaks Ln

City State Zip Code  
Bloomington IN 47401-6134

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25653

Amount of Each Receipt this Period  
80.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Aase A Loescher

Mailing Address 2661 E Fair Oaks Ln

City State Zip Code  
Bloomington IN 47401-6134

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25654

Amount of Each Receipt this Period  
80.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Aase A Loescher

Mailing Address 2661 E Fair Oaks Ln

City State Zip Code  
Bloomington IN 47401-6134

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25655

Amount of Each Receipt this Period  
80.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 248 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. Aase A Loescher</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 2661 E Fair Oaks Ln		<b>Transaction ID: SA11A1.25656</b>	
City Bloomington	State IN	Amount of Each Receipt this Period 80.00	
Zip Code 47401-6134		Earmark to Ned Lamont (CT-00S)	
FEC ID number of contributing federal political committee. C		<b>[MEMO ITEM]</b>	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Aase A Loescher</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 2661 E Fair Oaks Ln		<b>Transaction ID: SA11A1.25658</b>	
City Bloomington	State IN	Amount of Each Receipt this Period 80.00	
Zip Code 47401-6134		Earmark to Daniel Akada (HI-00S)	
FEC ID number of contributing federal political committee. C		<b>[MEMO ITEM]</b>	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Aase A Loescher</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 2661 E Fair Oaks Ln		<b>Transaction ID: SA11A1.25660</b>	
City Bloomington	State IN	Amount of Each Receipt this Period 80.00	
Zip Code 47401-6134		Earmark to Robert C. Byrd (WV-00S)	
FEC ID number of contributing federal political committee. C		<b>[MEMO ITEM]</b>	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 249 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Aase A Loescher

Mailing Address 2661 E Fair Oaks Ln

City State Zip Code  
**Bloomington IN 47401-6134**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 25 / 2006

**Transaction ID: SA11A1.25650**

Amount of Each Receipt this Period  
50.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Aase A Loescher

Mailing Address 2661 E Fair Oaks Ln

City State Zip Code  
**Bloomington IN 47401-6134**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 25 / 2006

**Transaction ID: SA11A1.25652**

Amount of Each Receipt this Period  
50.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Aase A Loescher

Mailing Address 2661 E Fair Oaks Ln

City State Zip Code  
**Bloomington IN 47401-6134**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 25 / 2006

**Transaction ID: SA11A1.25657**

Amount of Each Receipt this Period  
50.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... 0.00

**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 250 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. Aase A Loescher</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 25 / 2006
Mailing Address 2661 E Fair Oaks Ln		Transaction ID: SA11A1.25659
City Bloomington	State IN	Zip Code 47401-6134
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer	Occupation	Earmark to Dan Maffei (NY-25H)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>B. Jeanne A Lohmann</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 25 / 2006
Mailing Address 1211 Thomas St NW		Transaction ID: SA11A1.25662
City Olympia	State WA	Zip Code 98502-4661
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer	Occupation	Earmark to Sherrod Brown (OH-00S)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>C. Jeanne A Lohmann</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 25 / 2006
Mailing Address 1211 Thomas St NW		Transaction ID: SA11A1.25663
City Olympia	State WA	Zip Code 98502-4661
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer	Occupation	Earmark to John Tester (M-T-00S)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 251 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Charles R Lord Mailing Address PO Box 464 City Pleasant Hill State TN Zip Code 38578-0464 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25664 Amount of Each Receipt this Period 20.00 Earmark to Bruce Braley (IA-01H)
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>

<b>B.</b> Full Name (Last, First, Middle Initial) Ann Lowry Mailing Address 1022 W Daniel St City Champaign State IL Zip Code 61821-4518 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25665 Amount of Each Receipt this Period 50.00 Earmark to Sherrod Brown (OH-00S)
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>

<b>C.</b> Full Name (Last, First, Middle Initial) Ann Lowry Mailing Address 1022 W Daniel St City Champaign State IL Zip Code 61821-4518 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25666 Amount of Each Receipt this Period 50.00 Earmark to Bernie Sanders (VT-00S)
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 252 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

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

Mailing Address 11010 Peaks Pike Rd

City State Zip Code  
**Sebastopol CA 95472-9303**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
**09 25 2006**

Transaction ID: SA11A1.25667

Amount of Each Receipt this Period  
50.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

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

Mailing Address 11010 Peaks Pike Rd

City State Zip Code  
**Sebastopol CA 95472-9303**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
**09 25 2006**

Transaction ID: SA11A1.25668

Amount of Each Receipt this Period  
50.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
John Lowry

Mailing Address 11010 Peaks Pike Rd

City State Zip Code  
**Sebastopol CA 95472-9303**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
**09 25 2006**

Transaction ID: SA11A1.25669

Amount of Each Receipt this Period  
50.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

**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 253 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> John Lowry		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 11010 Peaks Pike Rd		Transaction ID: SA11A1.25670	
City State Zip Code Sebastopol CA 95472-9303	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Earmark to John Tester (M-T-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> John Lowry		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 11010 Peaks Pike Rd		Transaction ID: SA11A1.25671	
City State Zip Code Sebastopol CA 95472-9303	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Earmark to Sherrod Brown (OH-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> John Lowry		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 11010 Peaks Pike Rd		Transaction ID: SA11A1.25672	
City State Zip Code Sebastopol CA 95472-9303	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Earmark to Robert C. Byrd (WV-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 254 / 932
	<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	

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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> John Lowry		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006
Mailing Address 11010 Peaks Pike Rd		Transaction ID: SA11A1.25673
City State Zip Code Sebastopol CA 95472-9303	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>	Earmark to Bob Menendez (NJ-00S)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) <b>B.</b> John Lowry		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006
Mailing Address 11010 Peaks Pike Rd		Transaction ID: SA11A1.25674
City State Zip Code Sebastopol CA 95472-9303	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>	Earmark to Benjamin Cardin (MD-00S)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) <b>C.</b> Robert A Ludwig		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 143 Lexington Ave		Transaction ID: SA11A1.25675
City State Zip Code Buffalo NY 14222-1809	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. <b>C</b>	Earmark to Bob Menendez (NJ-00S)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 255 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

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

Mailing Address 143 Lexington Ave

City State Zip Code  
Buffalo NY 14222-1809

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25676

Amount of Each Receipt this Period  
35.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

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

Mailing Address 143 Lexington Ave

City State Zip Code  
Buffalo NY 14222-1809

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25677

Amount of Each Receipt this Period  
35.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Robert A Ludwig

Mailing Address 143 Lexington Ave

City State Zip Code  
Buffalo NY 14222-1809

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25678

Amount of Each Receipt this Period  
35.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

**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 256 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. Julius Lugovoy</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 05 / 2006	
Mailing Address 181 Copley Avenue		Transaction ID: SA11A1.25680	
City State Zip Code Teaneck NJ 07666-4163	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Earmark to John Tester (M-T-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B. Jashbhai D Luhar</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 9021 Ardendale Ave		Transaction ID: SA11A1.25682	
City State Zip Code San Gabriel CA 91775-2001	Amount of Each Receipt this Period 2.00		
FEC ID number of contributing federal political committee. C	Earmark to Bob Casey (PA-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C. Sverre Lyngstad</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 180 Park Row Apt 5C		Transaction ID: SA11A1.25684	
City State Zip Code New York NY 10038-1134	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Earmark to Ned Lamont (CT-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 257 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Dorothy MacKay Mailing Address 17221 Ontario St City State Zip Code Detroit MI 48224-2287 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 Transaction ID: SA11A1.25686 Amount of Each Receipt this Period 20.00 Earmark to Daniel Akada (HI-00S) <b>[MEMO ITEM]</b>
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	

B. Full Name (Last, First, Middle Initial) Dorothy MacKay Mailing Address 17221 Ontario St City State Zip Code Detroit MI 48224-2287 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 Transaction ID: SA11A1.25687 Amount of Each Receipt this Period 20.00 Earmark to Ned Lamont (CT-00S) <b>[MEMO ITEM]</b>
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	

C. Full Name (Last, First, Middle Initial) Dorothy MacKay Mailing Address 17221 Ontario St City State Zip Code Detroit MI 48224-2287 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 Transaction ID: SA11A1.25688 Amount of Each Receipt this Period 20.00 Earmark to Benjamin Cardin (MD-00S) <b>[MEMO ITEM]</b>
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 258 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Dorothy MacKay  
Mailing Address 17221 Ontario St  
City State Zip Code  
Detroit MI 48224-2287  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006  
Transaction ID: SA11A1.25689  
Amount of Each Receipt this Period  
20.00  
Earmark to Sherrod Brown (OH-00S)  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Dorothy MacKay  
Mailing Address 17221 Ontario St  
City State Zip Code  
Detroit MI 48224-2287  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006  
Transaction ID: SA11A1.25690  
Amount of Each Receipt this Period  
20.00  
Earmark to Bernie Sanders (VT-00S)  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
David M MacKenzie  
Mailing Address 28 Starbuck Dr.  
City State Zip Code  
Muir Beach CA 94965-9715  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 18 / 2006  
Transaction ID: SA11A1.25692  
Amount of Each Receipt this Period  
100.00  
Earmark to Joseph A. Sestak (PA-07H)  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00  
**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 259 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
David M MacKenzie

Mailing Address 28 Starbuck Dr.

City State Zip Code  
Muir Beach CA 94965-9715

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

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

Transaction ID: SA11A1.25693

Amount of Each Receipt this Period  
100.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
David M MacKenzie

Mailing Address 28 Starbuck Dr.

City State Zip Code  
Muir Beach CA 94965-9715

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

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

Transaction ID: SA11A1.25694

Amount of Each Receipt this Period  
100.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

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

Mailing Address 4581 Sequoia Dr

City State Zip Code  
Harrisburg PA 17109-5140

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25695

Amount of Each Receipt this Period  
25.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 260 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Paul A Makurath

Mailing Address 4581 Sequoia Dr

City State Zip Code  
Harrisburg PA 17109-5140

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25696

Amount of Each Receipt this Period  
10.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Paul A Makurath

Mailing Address 4581 Sequoia Dr

City State Zip Code  
Harrisburg PA 17109-5140

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25697

Amount of Each Receipt this Period  
10.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
John R. Mannheim

Mailing Address 5 Chestnut St

City State Zip Code  
Concord MA 01742-2608

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.27597

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>500.00</b>
<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 261 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> John R. Mannheim		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 5 Chestnut St		<b>Transaction ID:</b> SA11A1.27598	
City Concord	State MA	Amount of Each Receipt this Period 500.00	
Zip Code 01742-2608		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 2000.00			

Full Name (Last, First, Middle Initial) <b>B.</b> John Marks		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 0668 SW Palatine Hill Rd		<b>Transaction ID:</b> SA11A1.25698	
City Portland	State OR	Amount of Each Receipt this Period 100.00	
Zip Code 97219-7831		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ .00		Earmark to Diane Farrell (CT-04H) <b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>C.</b> John Marks		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 0668 SW Palatine Hill Rd		<b>Transaction ID:</b> SA11A1.25699	
City Portland	State OR	Amount of Each Receipt this Period 100.00	
Zip Code 97219-7831		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ .00		Earmark to Joseph A. Sestak (PA-07H) <b>[MEMO ITEM]</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<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 262 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> John Marks		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6
Mailing Address 0668 SW Palatine Hill Rd		Transaction ID: SA11A1.25700
City State Zip Code Portland OR 97219-7831	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Earmark to Bruce Braley (IA-01H)	
Name of Employer Retired Occupation Retired	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) <b>B.</b> John Marks		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6
Mailing Address 0668 SW Palatine Hill Rd		Transaction ID: SA11A1.25701
City State Zip Code Portland OR 97219-7831	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Earmark to Dan Maffei (NY-25H)	
Name of Employer Retired Occupation Retired	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) <b>C.</b> Dorothy Marshall		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 1013 Hampton Rd		Transaction ID: SA11A1.25702
City State Zip Code Sacramento CA 95864-5003	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Earmark to Sherrod Brown (OH-00S)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 263 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. Hubert Marshall</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 611 Alvarado Row		Transaction ID: SA11A1.25703	
City State Zip Code Stanford CA 94305-8507	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bernie Sanders (VT-00S)	
Name of Employer Retired Occupation Retired	[MEMO ITEM]		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B. Strother B Marshall</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 1790 11th St		Transaction ID: SA11A1.25704	
City State Zip Code Los Osos CA 93402-2239	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bob Menendez (NJ-00S)	
Name of Employer Occupation	[MEMO ITEM]		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C. Martha E Martin</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address PO Box 790300		Transaction ID: SA11A1.25705	
City State Zip Code Paia HI 96779-0300	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Patty Wetterling (MN-06H)	
Name of Employer Occupation	[MEMO ITEM]		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 264 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Martha E Martin

Mailing Address PO Box 790300

City Paia State HI Zip Code 96779-0300

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.25706

Amount of Each Receipt this Period  

100.00
--------

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Linden P Martineau

Mailing Address 5000 Boardwalk Apt 1118

City Ventnor City State NJ Zip Code 08406-2920

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25707

Amount of Each Receipt this Period  

10.00
-------

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Linden P Martineau

Mailing Address 5000 Boardwalk Apt 1118

City Ventnor City State NJ Zip Code 08406-2920

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25708

Amount of Each Receipt this Period  

10.00
-------

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>0.00</b>
<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 265 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Linden P Martineau

Mailing Address 5000 Boardwalk Apt 1118

City State Zip Code  
Ventnor City NJ 08406-2920

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	0	6

Transaction ID: SA11A1.25709

Amount of Each Receipt this Period  
.....10.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Linden P Martineau

Mailing Address 5000 Boardwalk Apt 1118

City State Zip Code  
Ventnor City NJ 08406-2920

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	0	6

Transaction ID: SA11A1.25710

Amount of Each Receipt this Period  
.....10.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Linden P Martineau

Mailing Address 5000 Boardwalk Apt 1118

City State Zip Code  
Ventnor City NJ 08406-2920

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	0	6

Transaction ID: SA11A1.25711

Amount of Each Receipt this Period  
.....10.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 266 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Linden P Martineau

Mailing Address 5000 Boardwalk Apt 1118

City State Zip Code  
Ventnor City NJ 08406-2920

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25712

Amount of Each Receipt this Period  
.....10.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Linden P Martineau

Mailing Address 5000 Boardwalk Apt 1118

City State Zip Code  
Ventnor City NJ 08406-2920

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25713

Amount of Each Receipt this Period  
.....10.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Linden P Martineau

Mailing Address 5000 Boardwalk Apt 1118

City State Zip Code  
Ventnor City NJ 08406-2920

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25714

Amount of Each Receipt this Period  
.....10.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 267 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. Richard B McAdoo</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 1010 Waltham St Apt F7		Transaction ID: SA11A1.27578	
City Lexington State MA Zip Code 02421-8061	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Information Requested Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. John McCaslin</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 7323 Shirley St Apt 305		Transaction ID: SA11A1.25716	
City Omaha State NE Zip Code 68124-1739	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation		Earmark to Bob Casey (PA-00S)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ .00	

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial) <b>C. Tom McCoy</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 130 5th Street		Transaction ID: SA11A1.25718	
City Barberton State OH Zip Code 44203	Amount of Each Receipt this Period 1.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation		Earmark to Sherrod Brown (OH-00S)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ .00	

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	250.00
<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 268 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Donald M McPherson		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 2161 Middlefield Rd		Transaction ID: SA11A1.25719	
City Cleveland	State OH	Zip Code 44106-3324	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Sherrod Brown (OH-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Elizabeth R Means		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 544 Beach Dr		Transaction ID: SA11A1.25721	
City Aptos	State CA	Zip Code 95003-5306	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bernie Sanders (VT-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Noble J Meisdalen		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address PO Box 1311		Transaction ID: SA11A1.25722	
City Malta	State MT	Zip Code 59538-1311	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to John Tester (M-T-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 269 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Barbara J Meislin Mailing Address PO Box 1277 City Tiburon State CA Zip Code 94920-4277 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25723 Amount of Each Receipt this Period 100.00 Earmark to Sherrod Brown (OH-00S) <b>[MEMO ITEM]</b>
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	

<b>B.</b> Full Name (Last, First, Middle Initial) Barbara J Meislin Mailing Address PO Box 1277 City Tiburon State CA Zip Code 94920-4277 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25724 Amount of Each Receipt this Period 100.00 Earmark to Bob Menendez (NJ-00S) <b>[MEMO ITEM]</b>
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	

<b>C.</b> Full Name (Last, First, Middle Initial) Barbara J Meislin Mailing Address PO Box 1277 City Tiburon State CA Zip Code 94920-4277 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25726 Amount of Each Receipt this Period 100.00 Earmark to Benjamin Cardin (MD-00S) <b>[MEMO ITEM]</b>
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 270 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Barbara J Meislin

Mailing Address PO Box 1277

City State Zip Code  
Tiburon CA 94920-4277

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25727

Amount of Each Receipt this Period  
.....100.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Barbara J Meislin

Mailing Address PO Box 1277

City State Zip Code  
Tiburon CA 94920-4277

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25729

Amount of Each Receipt this Period  
.....100.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Barbara J Meislin

Mailing Address PO Box 1277

City State Zip Code  
Tiburon CA 94920-4277

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	6

Transaction ID: SA11A1.25725

Amount of Each Receipt this Period  
.....100.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

**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 271 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Barbara J Meislin Mailing Address PO Box 1277 City Tiburon State CA Zip Code 94920-4277 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25728 Amount of Each Receipt this Period 100.00 Earmark to Diane Farrell (CT-04H) <b>[MEMO ITEM]</b>
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	

<b>B.</b> Full Name (Last, First, Middle Initial) Michael Melampy Mailing Address 143 Westbridge Dr City Berea State OH Zip Code 44017-1547 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25731 Amount of Each Receipt this Period 50.00 Earmark to Bob Casey (PA-00S) <b>[MEMO ITEM]</b>
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	

<b>C.</b> Full Name (Last, First, Middle Initial) Gerald H Meral Mailing Address PO Box 1103 City Inverness State CA Zip Code 94937-1103 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25732 Amount of Each Receipt this Period 30.00 Earmark to John Tester (M-T-00S) <b>[MEMO ITEM]</b>
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 272 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Gerald H Meral

Mailing Address PO Box 1103

City State Zip Code  
**Inverness CA 94937-1103**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 / 15 / 2006**

**Transaction ID: SA11A1.25733**

Amount of Each Receipt this Period  
.....30.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

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

Mailing Address 19 Chauncy Street #6A

City State Zip Code  
**Cambridge MA 02138**

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

Name of Employer Occupation  
Harvard University Professor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 / 22 / 2006**

**Transaction ID: SA11A1.24647**

Amount of Each Receipt this Period  
.....5000.00

**C.** Full Name (Last, First, Middle Initial)  
Albert Metzger

Mailing Address 380 Olive Tree Ln

City State Zip Code  
**Sierra Madre CA 91024-1143**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 / 25 / 2006**

**Transaction ID: SA11A1.25734**

Amount of Each Receipt this Period  
.....25.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	..... <b>5000.00</b> .....
<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 273 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Albert Metzger  
 Mailing Address 380 Olive Tree Ln  
 City State Zip Code  
 Sierra Madre CA 91024-1143  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 5 / 2 0 0 6  
**Transaction ID:** SA11A1.25735  
 Amount of Each Receipt this Period  
 25.00  
 Earmark to Bob Menendez (NJ-00S)  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Albert Metzger  
 Mailing Address 380 Olive Tree Ln  
 City State Zip Code  
 Sierra Madre CA 91024-1143  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 5 / 2 0 0 6  
**Transaction ID:** SA11A1.25736  
 Amount of Each Receipt this Period  
 25.00  
 Earmark to Benjamin Cardin (MD-00S)  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Albert Metzger  
 Mailing Address 380 Olive Tree Ln  
 City State Zip Code  
 Sierra Madre CA 91024-1143  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 5 / 2 0 0 6  
**Transaction ID:** SA11A1.25737  
 Amount of Each Receipt this Period  
 25.00  
 Earmark to Dan Maffei (NY-25H)  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00  
**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 274 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Albert Metzger

Mailing Address 380 Olive Tree Ln

City State Zip Code  
Sierra Madre CA 91024-1143

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25738

Amount of Each Receipt this Period  
35.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Bert L Metzger

Mailing Address 2720 14th Ave S Apt 6

City State Zip Code  
Seattle WA 98144-5069

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25739

Amount of Each Receipt this Period  
10.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Bert L Metzger

Mailing Address 2720 14th Ave S Apt 6

City State Zip Code  
Seattle WA 98144-5069

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25740

Amount of Each Receipt this Period  
10.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 275 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Bert L Metzger

Mailing Address 2720 14th Ave S Apt 6

City State Zip Code  
Seattle WA 98144-5069

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25741

Amount of Each Receipt this Period  
10.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Bert L Metzger

Mailing Address 2720 14th Ave S Apt 6

City State Zip Code  
Seattle WA 98144-5069

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25742

Amount of Each Receipt this Period  
10.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Bert L Metzger

Mailing Address 2720 14th Ave S Apt 6

City State Zip Code  
Seattle WA 98144-5069

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25743

Amount of Each Receipt this Period  
10.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... 0.00

**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: <span style="float: right;">PAGE 276 / 932</span> (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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

<b>A.</b> Full Name (Last, First, Middle Initial) Bert L Metzger Mailing Address 2720 14th Ave S Apt 6 City State Zip Code Seattle WA 98144-5069 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID: SA11A1.25744</b> Amount of Each Receipt this Period 10.00 Earmark to Sherrod Brown (OH-00S) <b>[MEMO ITEM]</b>
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00

<b>B.</b> Full Name (Last, First, Middle Initial) Bert L Metzger Mailing Address 2720 14th Ave S Apt 6 City State Zip Code Seattle WA 98144-5069 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID: SA11A1.25745</b> Amount of Each Receipt this Period 10.00 Earmark to Bernie Sanders (VT-00S) <b>[MEMO ITEM]</b>
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00

<b>C.</b> Full Name (Last, First, Middle Initial) Bert L Metzger Mailing Address 2720 14th Ave S Apt 6 City State Zip Code Seattle WA 98144-5069 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID: SA11A1.25746</b> Amount of Each Receipt this Period 10.00 Earmark to Bob Menendez (NJ-00S) <b>[MEMO ITEM]</b>
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 277 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Paul Michabofsky

Mailing Address PO Box 60971

City State Zip Code  
Pasadena CA 91116-6971

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	6

Transaction ID: SA11A1.25747

Amount of Each Receipt this Period  
10.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

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

Mailing Address PO Box 60971

City State Zip Code  
Pasadena CA 91116-6971

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	6

Transaction ID: SA11A1.25748

Amount of Each Receipt this Period  
10.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

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

Mailing Address PO Box 60971

City State Zip Code  
Pasadena CA 91116-6971

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	6

Transaction ID: SA11A1.25749

Amount of Each Receipt this Period  
10.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

**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 278 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Paul Michabofsky  
 Mailing Address PO Box 60971  
 City Pasadena State CA Zip Code 91116-6971  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 5 / 2 0 0 6  
**Transaction ID:** SA11A1.25750  
 Amount of Each Receipt this Period  
 10.00  
 Earmark to John Tester (M-T-00S)  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Paul Michabofsky  
 Mailing Address PO Box 60971  
 City Pasadena State CA Zip Code 91116-6971  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 5 / 2 0 0 6  
**Transaction ID:** SA11A1.25751  
 Amount of Each Receipt this Period  
 10.00  
 Earmark to Sherrod Brown (OH-00S)  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Evalyn J Michaelson  
 Mailing Address 530 S Ogden Dr  
 City Los Angeles State CA Zip Code 90036-3231  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6  
**Transaction ID:** SA11A1.25753  
 Amount of Each Receipt this Period  
 35.00  
 Earmark to Sherrod Brown (OH-00S)  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00  
**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 279 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Florence Kate Millar		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 8410 Westmont Ter		Transaction ID: SA11A1.25754	
City Bethesda	State MD	Amount of Each Receipt this Period 100.00	
Zip Code 20817-6813		Earmark to Bob Menendez (NJ-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Florence Kate Millar		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 8410 Westmont Ter		Transaction ID: SA11A1.25755	
City Bethesda	State MD	Amount of Each Receipt this Period 100.00	
Zip Code 20817-6813		Earmark to John Tester (M-T-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Florence Kate Millar		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 8410 Westmont Ter		Transaction ID: SA11A1.25756	
City Bethesda	State MD	Amount of Each Receipt this Period 100.00	
Zip Code 20817-6813		Earmark to Dan Maffei (NY-25H)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 280 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Mark Miller Mailing Address 300 Williams St City State Zip Code Pittsfield MA 01201-7451 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.25758 Amount of Each Receipt this Period 50.00 Earmark to Bob Casey (PA-00S) <b>[MEMO ITEM]</b>
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>B.</b> Full Name (Last, First, Middle Initial) Glen H Mitchell Mailing Address 423 Ridgeview Dr City State Zip Code Blacksburg VA 24060-5043 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.25759 Amount of Each Receipt this Period 25.00 Earmark to Dan Maffei (NY-25H) <b>[MEMO ITEM]</b>
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>C.</b> Full Name (Last, First, Middle Initial) Glen H Mitchell Mailing Address 423 Ridgeview Dr City State Zip Code Blacksburg VA 24060-5043 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.25760 Amount of Each Receipt this Period 25.00 Earmark to Bruce Braley (IA-01H) <b>[MEMO ITEM]</b>
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 281 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
William J Mitchell  
 Mailing Address 3857 SW 5th Pl  
 City State Zip Code  
 Gainesville FL 32607-2720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006  
**Transaction ID:** SA11A1.25762  
 Amount of Each Receipt this Period  
 50.00  
 Earmark to Bob Casey (PA-00S)  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
James Moffat  
 Mailing Address 1077 Rice Rd  
 City State Zip Code  
 San Antonio TX 78220-3516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 25 / 2006  
**Transaction ID:** SA11A1.25764  
 Amount of Each Receipt this Period  
 25.00  
 Earmark to Ned Lamont (CT-00S)  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Giancarlo Moneti  
 Mailing Address 707 Sumner Ave  
 City State Zip Code  
 Syracuse NY 13210-2925  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2006  
**Transaction ID:** SA11A1.25765  
 Amount of Each Receipt this Period  
 100.00  
 Earmark to Bob Casey (PA-00S)  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00  
**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 282 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Jean M Mont-Eton

Mailing Address 4333 Ulloa St

City San Francisco State CA Zip Code 94116-2068

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 25 / 2006

Transaction ID: SA11A1.25766

Amount of Each Receipt this Period  
 20.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
K John Morrow

Mailing Address 625 Washington Ave

City Newport State KY Zip Code 41071-1924

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25768

Amount of Each Receipt this Period  
 20.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Bruce Morton

Mailing Address 6920 Race Horse Ln

City N Bethesda State MD Zip Code 20852-4362

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2006

Transaction ID: SA11A1.25769

Amount of Each Receipt this Period  
 50.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 283 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Merritt Moselle

Mailing Address 1987 Snowberry Ct

City State Zip Code  
Carlsbad CA 92009-8408

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

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

Transaction ID: SA11A1.25770

Amount of Each Receipt this Period  
25.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Seth D Mosgofian

Mailing Address 1309 Calle Ramon

City State Zip Code  
Santa Fe NM 87501-8937

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.25772

Amount of Each Receipt this Period  
10.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Seth D Mosgofian

Mailing Address 1309 Calle Ramon

City State Zip Code  
Santa Fe NM 87501-8937

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.25773

Amount of Each Receipt this Period  
10.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 284 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Seth D Mosgofian		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 1309 Calle Ramon		Transaction ID: SA11A1.25774	
City State Zip Code Santa Fe NM 87501-8937	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bernie Sanders (VT-00S)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Seth D Mosgofian		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 1309 Calle Ramon		Transaction ID: SA11A1.25775	
City State Zip Code Santa Fe NM 87501-8937	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Daniel Akada (HI-00S)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Seth D Mosgofian		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 1309 Calle Ramon		Transaction ID: SA11A1.25776	
City State Zip Code Santa Fe NM 87501-8937	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bob Menendez (NJ-00S)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 285 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Seth D Mosgofian		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 1309 Calle Ramon		Transaction ID: SA11A1.25777	
City State Zip Code Santa Fe NM 87501-8937	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C	Earmark to John Tester (M-T-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Seth D Mosgofian		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 1309 Calle Ramon		Transaction ID: SA11A1.25778	
City State Zip Code Santa Fe NM 87501-8937	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C	Earmark to Benjamin Cardin (MD-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Seth D Mosgofian		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 1309 Calle Ramon		Transaction ID: SA11A1.25779	
City State Zip Code Santa Fe NM 87501-8937	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C	Earmark to Ned Lamont (CT-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 286 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. Anita V Mozley</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address 601 Laurel Ave		<b>Transaction ID: SA11A1.25781</b>	
City State Zip Code Menlo Park CA 94025-2608	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Daniel Akada (HI-00S)	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00		
<b>[MEMO ITEM]</b>			

Full Name (Last, First, Middle Initial) <b>B. Burton H Muller</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address 508 S 19th St		<b>Transaction ID: SA11A1.25782</b>	
City State Zip Code Laramie WY 82070-4310	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Dan Maffei (NY-25H)	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00		
<b>[MEMO ITEM]</b>			

Full Name (Last, First, Middle Initial) <b>C. Burton H Muller</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address 508 S 19th St		<b>Transaction ID: SA11A1.25784</b>	
City State Zip Code Laramie WY 82070-4310	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bruce Braley (IA-01H)	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00		
<b>[MEMO ITEM]</b>			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 287 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Burton H Muller

Mailing Address 508 S 19th St

City State Zip Code  
**Laramie WY 82070-4310**

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2006

**Transaction ID: SA11A1.25783**

Amount of Each Receipt this Period  
.....100.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Sandra C Mullin

Mailing Address 10 Forestedge Rd

City State Zip Code  
**Amherst MA 01002-1534**

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

**Transaction ID: SA11A1.25785**

Amount of Each Receipt this Period  
.....15.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Sandra C Mullin

Mailing Address 10 Forestedge Rd

City State Zip Code  
**Amherst MA 01002-1534**

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

**Transaction ID: SA11A1.25786**

Amount of Each Receipt this Period  
.....15.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► .....0.00

**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 288 / 932  
(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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Kurt A Munnich

Mailing Address 4704 W Glenhaven Dr

City State Zip Code  
Everett WA 98203-1735

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25787

Amount of Each Receipt this Period  
100.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Kurt A Munnich

Mailing Address 4704 W Glenhaven Dr

City State Zip Code  
Everett WA 98203-1735

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25788

Amount of Each Receipt this Period  
100.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Kurt A Munnich

Mailing Address 4704 W Glenhaven Dr

City State Zip Code  
Everett WA 98203-1735

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25789

Amount of Each Receipt this Period  
100.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

**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 289 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Kurt A Munnich

Mailing Address 4704 W Glenhaven Dr

City State Zip Code  
Everett WA 98203-1735

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25790

Amount of Each Receipt this Period  
100.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

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

Mailing Address 2200 Beechwood Blvd.

City State Zip Code  
Pittsburgh PA 15217

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 29 / 2006

Transaction ID: SA11A1.25792

Amount of Each Receipt this Period  
50.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
R. Thomas Myers

Mailing Address 4285 Kent Rd Apt 431

City State Zip Code  
Stow OH 44224-5442

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25793

Amount of Each Receipt this Period  
50.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 290 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Mary L Napier Mailing Address 409 Avenue H City Kentwood State LA Zip Code 70444-2731 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25795 Amount of Each Receipt this Period 45.00 Earmark to Debbie Stabenow (MI-00S) <b>[MEMO ITEM]</b>
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mary L Napier Mailing Address 409 Avenue H City Kentwood State LA Zip Code 70444-2731 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25796 Amount of Each Receipt this Period 45.00 Earmark to Bernie Sanders (VT-00S) <b>[MEMO ITEM]</b>
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	

<b>C.</b> Full Name (Last, First, Middle Initial) Ruth H Neff Mailing Address 1045 4th St City Whitefish State MT Zip Code 59937-2709 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25798 Amount of Each Receipt this Period 150.00 Earmark to John Tester (M-T-00S) <b>[MEMO ITEM]</b>
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 291 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Albert P Neilson		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address PO Box 29		Transaction ID: SA11A1.25799	
City Suplee	State PA	Amount of Each Receipt this Period 500.00	
Zip Code 19371-0029		Earmark to Bob Casey (PA-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer Retired	Occupation Retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ .00			

Full Name (Last, First, Middle Initial) <b>B.</b> Sherman G Neusom		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 121 Lime St		Transaction ID: SA11A1.25800	
City Inglewood	State CA	Amount of Each Receipt this Period 5.00	
Zip Code 90301-2632		Earmark to Diane Farrell (CT-04H)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ .00			

Full Name (Last, First, Middle Initial) <b>C.</b> Sherman G Neusom		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 121 Lime St		Transaction ID: SA11A1.25801	
City Inglewood	State CA	Amount of Each Receipt this Period 5.00	
Zip Code 90301-2632		Earmark to Bruce Braley (IA-01H)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ .00			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 292 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Sherman G Neusom		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 121 Lime St		Transaction ID: SA11A1.25802	
City Inglewood	State CA	Zip Code 90301-2632	Amount of Each Receipt this Period 5.00
FEC ID number of contributing federal political committee. C		Earmark to Dan Maffei (NY-25H)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Connie Newman		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 4021 Stone Canyon Ave		Transaction ID: SA11A1.25804	
City Sherman Oaks	State CA	Zip Code 91403-4542	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Earmark to Bob Casey (PA-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ezra T Newman		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2006	
Mailing Address 1308 Denniston St		Transaction ID: SA11A1.25805	
City Pittsburgh	State PA	Zip Code 15217-1331	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Earmark to Benjamin Cardin (MD-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 293 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Ezra T Newman

Mailing Address 1308 Denniston St

City State Zip Code  
Pittsburgh PA 15217-1331

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	3	/	2	0	0	6

Transaction ID: SA11A1.25808

Amount of Each Receipt this Period  
.....50.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Ezra T Newman

Mailing Address 1308 Denniston St

City State Zip Code  
Pittsburgh PA 15217-1331

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	3	/	2	0	0	6

Transaction ID: SA11A1.25811

Amount of Each Receipt this Period  
.....50.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Ezra T Newman

Mailing Address 1308 Denniston St

City State Zip Code  
Pittsburgh PA 15217-1331

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

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

Transaction ID: SA11A1.25809

Amount of Each Receipt this Period  
.....50.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 294 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Ezra T Newman		Date of Receipt M M / D D / Y Y Y Y 09 / 12 / 2006	
Mailing Address 1308 Denniston St		<b>Transaction ID:</b> SA11A1.25814	
City State Zip Code Pittsburgh PA 15217-1331	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Eric Massa (NY-09H)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>B.</b> Full Name (Last, First, Middle Initial) Ezra T Newman		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2006	
Mailing Address 1308 Denniston St		<b>Transaction ID:</b> SA11A1.25806	
City State Zip Code Pittsburgh PA 15217-1331	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Joseph A. Sestak (PA-07H)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>C.</b> Full Name (Last, First, Middle Initial) Ezra T Newman		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2006	
Mailing Address 1308 Denniston St		<b>Transaction ID:</b> SA11A1.25807	
City State Zip Code Pittsburgh PA 15217-1331	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bob Casey (PA-00S)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

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

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

FOR LINE NUMBER: PAGE 295 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Ezra T Newman

Mailing Address 1308 Denniston St

City State Zip Code  
Pittsburgh PA 15217-1331

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	0	6

Transaction ID: SA11A1.25810

Amount of Each Receipt this Period  
.....50.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Ezra T Newman

Mailing Address 1308 Denniston St

City State Zip Code  
Pittsburgh PA 15217-1331

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	0	6

Transaction ID: SA11A1.25812

Amount of Each Receipt this Period  
.....50.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Ezra T Newman

Mailing Address 1308 Denniston St

City State Zip Code  
Pittsburgh PA 15217-1331

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	0	6

Transaction ID: SA11A1.25813

Amount of Each Receipt this Period  
.....50.00

Earmark to Zack Space (OH-19H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 296 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Thomas Newman

Mailing Address 537 Vista Ave

City San Carlos State CA Zip Code 94070-1933

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

Name of Employer UCSF Occupation Professor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
09 / 25 / 2006

Transaction ID: SA11A1.27592

Amount of Each Receipt this Period  
1500.00

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

Mailing Address PO Box 205

City Grafton State NY Zip Code 12082-0205

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 14 / 2006

Transaction ID: SA11A1.25816

Amount of Each Receipt this Period  
100.00

Earmark to Kent Conrad (N-D-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Lawrie Nickerson

Mailing Address PO Box 205

City Grafton State NY Zip Code 12082-0205

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 14 / 2006

Transaction ID: SA11A1.25817

Amount of Each Receipt this Period  
100.00

Earmark to Tom Carper (DE-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<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 297 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. Lawrie Nickerson</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 14 / 2006	
Mailing Address PO Box 205		Transaction ID: SA11A1.25818	
City Grafton	State NY	Zip Code 12082-0205	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Earmark to Robert C. Byrd (WV-00S)	
Name of Employer	Occupation	[MEMO ITEM]	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B. Lawrie Nickerson</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 14 / 2006	
Mailing Address PO Box 205		Transaction ID: SA11A1.25819	
City Grafton	State NY	Zip Code 12082-0205	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Earmark to Sherrod Brown (OH-00S)	
Name of Employer	Occupation	[MEMO ITEM]	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C. Lawrie Nickerson</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 14 / 2006	
Mailing Address PO Box 205		Transaction ID: SA11A1.25820	
City Grafton	State NY	Zip Code 12082-0205	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Earmark to Jeff Bingaman (NM-00S)	
Name of Employer	Occupation	[MEMO ITEM]	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 298 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Lawrie Nickerson

Mailing Address PO Box 205

City State Zip Code  
Grafton NY 12082-0205

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 14 / 2006

Transaction ID: SA11A1.25821

Amount of Each Receipt this Period  
100.00

Earmark to Debbie Stabenow (MI-00S)

**[MEMO ITEM]**

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

Mailing Address PO Box 205

City State Zip Code  
Grafton NY 12082-0205

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 14 / 2006

Transaction ID: SA11A1.25822

Amount of Each Receipt this Period  
100.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Lawrie Nickerson

Mailing Address PO Box 205

City State Zip Code  
Grafton NY 12082-0205

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 14 / 2006

Transaction ID: SA11A1.25823

Amount of Each Receipt this Period  
100.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 299 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Lawrie Nickerson

Mailing Address PO Box 205

City State Zip Code  
Grafton NY 12082-0205

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 1 4 / 2 0 0 6

Transaction ID: SA11A1.25824

Amount of Each Receipt this Period  
100.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

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

Mailing Address PO Box 205

City State Zip Code  
Grafton NY 12082-0205

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 1 4 / 2 0 0 6

Transaction ID: SA11A1.25825

Amount of Each Receipt this Period  
100.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Lawrie Nickerson

Mailing Address PO Box 205

City State Zip Code  
Grafton NY 12082-0205

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 1 4 / 2 0 0 6

Transaction ID: SA11A1.25826

Amount of Each Receipt this Period  
100.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 300 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Lawrie Nickerson Mailing Address PO Box 205 City Grafton State NY Zip Code 12082-0205 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt <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>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.25827 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Earmark to Daniel Akada (HI-00S) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	4		2	0	0	6	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	4		2	0	0	6														
100.00																							

<b>B.</b> Full Name (Last, First, Middle Initial) John W Nielsen Mailing Address 2044 Grant St City Blair State NE Zip Code 68008-1824 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt <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>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.25829 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Earmark to Bob Menendez (NJ-00S) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0	6	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	5		2	0	0	6														
50.00																							

<b>C.</b> Full Name (Last, First, Middle Initial) John W Nielsen Mailing Address 2044 Grant St City Blair State NE Zip Code 68008-1824 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt <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>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.25830 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Earmark to Robert C. Byrd (WV-00S) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0	6	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	5		2	0	0	6														
50.00																							

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<b>0.00</b>
<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 301 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

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

Mailing Address 2044 Grant St

City State Zip Code  
Blair NE 68008-1824

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 15 / 2006

**Transaction ID:** SA11A1.25831

Amount of Each Receipt this Period  
50.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
John W Nielsen

Mailing Address 2044 Grant St

City State Zip Code  
Blair NE 68008-1824

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 15 / 2006

**Transaction ID:** SA11A1.25833

Amount of Each Receipt this Period  
50.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
John W Nielsen

Mailing Address 2044 Grant St

City State Zip Code  
Blair NE 68008-1824

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 15 / 2006

**Transaction ID:** SA11A1.25834

Amount of Each Receipt this Period  
50.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... 0.00

**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 302 / 932  
(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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

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

Mailing Address 2044 Grant St

City State Zip Code  
Blair NE 68008-1824

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	0	6

Transaction ID: SA11A1.25835

Amount of Each Receipt this Period  
 50.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
John W Nielsen

Mailing Address 2044 Grant St

City State Zip Code  
Blair NE 68008-1824

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	0	6

Transaction ID: SA11A1.25837

Amount of Each Receipt this Period  
 50.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
John W Nielsen

Mailing Address 2044 Grant St

City State Zip Code  
Blair NE 68008-1824

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	0	6

Transaction ID: SA11A1.25839

Amount of Each Receipt this Period  
 50.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<input type="text" value=""/> <b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<input type="text" value=""/>

**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 303 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

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

Mailing Address 2044 Grant St

City Blair State NE Zip Code 68008-1824

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 25 / 2006

Transaction ID: SA11A1.25828

Amount of Each Receipt this Period  
35.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
John W Nielsen

Mailing Address 2044 Grant St

City Blair State NE Zip Code 68008-1824

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 25 / 2006

Transaction ID: SA11A1.25832

Amount of Each Receipt this Period  
35.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
John W Nielsen

Mailing Address 2044 Grant St

City Blair State NE Zip Code 68008-1824

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 25 / 2006

Transaction ID: SA11A1.25836

Amount of Each Receipt this Period  
35.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

**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 304 / 932
	<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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

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

Mailing Address 2044 Grant St

City Blair State NE Zip Code 68008-1824

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	6

Transaction ID: SA11A1.25838

Amount of Each Receipt this Period  

35.00
-------

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Paul W Nisly

Mailing Address PO Box 262

City Grantham State PA Zip Code 17027-0262

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	0	6

Transaction ID: SA11A1.25840

Amount of Each Receipt this Period  

25.00
-------

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Barbara P Norfleet

Mailing Address 76 Raymond St

City Cambridge State MA Zip Code 02140-3619

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	6

Transaction ID: SA11A1.25841

Amount of Each Receipt this Period  

100.00
--------

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<b>0.00</b>
<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 305 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Libby Norton Mailing Address 94 Thornton Rd City Bangor State ME Zip Code 04401-3336 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.25842 Amount of Each Receipt this Period 25.00 Earmark to John Tester (M-T-00S) <b>[MEMO ITEM]</b>
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	

<b>B.</b> Full Name (Last, First, Middle Initial) Libby Norton Mailing Address 94 Thornton Rd City Bangor State ME Zip Code 04401-3336 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.25843 Amount of Each Receipt this Period 50.00 Earmark to Ned Lamont (CT-00S) <b>[MEMO ITEM]</b>
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	

<b>C.</b> Full Name (Last, First, Middle Initial) Wilbur Nussbaum Mailing Address 8 Vista Real Dr City Rilling Hls Est State CA Zip Code 90274-4227 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006 <b>Transaction ID:</b> SA11A1.25844 Amount of Each Receipt this Period 5.00 Earmark to Bruce Braley (IA-01H) <b>[MEMO ITEM]</b>
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 306 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Wilbur Nussbaum

Mailing Address 8 Vista Real Dr

City State Zip Code  
Rllng Hls Est CA 90274-4227

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	6

Transaction ID: SA11A1.25845

Amount of Each Receipt this Period  
5.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Arthur S Obermayer

Mailing Address 239 Chestnut Street

City State Zip Code  
Newton MA 02465

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

Name of Employer Occupation  
Molecular Research Corp. Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

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

Transaction ID: SA11A1.26428

Amount of Each Receipt this Period  
1000.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Arthur S Obermayer

Mailing Address 239 Chestnut Street

City State Zip Code  
Newton MA 02465

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

Name of Employer Occupation  
Molecular Research Corp. Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	4	/	2	0	0	6

Transaction ID: SA11A1.26427

Amount of Each Receipt this Period  
1000.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 307 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Arthur S Obermayer		Date of Receipt M M / D D / Y Y Y Y Y 09 / 25 / 2006
Mailing Address 239 Chestnut Street		Transaction ID: SA11A1.25847
City Newton	State MA	Zip Code 02465
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Molecular Research Corp.	Occupation Executive	Earmark to Joseph A. Sestak (PA-07H)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>B.</b> Alan E Oestreich		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006
Mailing Address 340 Warren Ave		Transaction ID: SA11A1.25849
City Cincinnati	State OH	Zip Code 45220-1135
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 17.00
Name of Employer	Occupation	Earmark to Benjamin Cardin (MD-00S)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>C.</b> Alan E Oestreich		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006
Mailing Address 340 Warren Ave		Transaction ID: SA11A1.25850
City Cincinnati	State OH	Zip Code 45220-1135
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 17.00
Name of Employer	Occupation	Earmark to Daniel Akada (HI-00S)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 308 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Alan E Oestreich

Mailing Address 340 Warren Ave

City State Zip Code  
Cincinnati OH 45220-1135

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25853

Amount of Each Receipt this Period  
17.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Alan E Oestreich

Mailing Address 340 Warren Ave

City State Zip Code  
Cincinnati OH 45220-1135

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25854

Amount of Each Receipt this Period  
17.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Alan E Oestreich

Mailing Address 340 Warren Ave

City State Zip Code  
Cincinnati OH 45220-1135

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	6

Transaction ID: SA11A1.25848

Amount of Each Receipt this Period  
8.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 309 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Alan E Oestreich

Mailing Address 340 Warren Ave

City State Zip Code  
Cincinnati OH 45220-1135

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	6

Transaction ID: SA11A1.25851

Amount of Each Receipt this Period  
8.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Alan E Oestreich

Mailing Address 340 Warren Ave

City State Zip Code  
Cincinnati OH 45220-1135

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	6

Transaction ID: SA11A1.25852

Amount of Each Receipt this Period  
8.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Alan E Oestreich

Mailing Address 340 Warren Ave

City State Zip Code  
Cincinnati OH 45220-1135

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	6

Transaction ID: SA11A1.25855

Amount of Each Receipt this Period  
8.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 310 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Nicholas D Ohly

Mailing Address 8 Academy St

City State Zip Code  
New Haven CT 06511-6929

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

Name of Employer Information Requested Occupation  
Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.27600

Amount of Each Receipt this Period  
250.00

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

Mailing Address 12 Outer Rd

City State Zip Code  
Norwalk CT 06854-4709

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2006

Transaction ID: SA11A1.25856

Amount of Each Receipt this Period  
100.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Morton Orentlicher

Mailing Address 116 Pinehurst Ave Apt M23

City State Zip Code  
New York NY 10033-1755

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.25858

Amount of Each Receipt this Period  
50.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	250.00
<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 311 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Morton Orentlicher

Mailing Address 116 Pinehurst Ave Apt M23

City State Zip Code  
New York NY 10033-1755

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.25859

Amount of Each Receipt this Period  
50.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

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

Mailing Address 116 Pinehurst Ave Apt M23

City State Zip Code  
New York NY 10033-1755

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.25860

Amount of Each Receipt this Period  
50.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Stuart Oskamp

Mailing Address 891 W Bonita Ave

City State Zip Code  
Claremont CA 91711-4115

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25861

Amount of Each Receipt this Period  
100.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 312 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Stuart Oskamp

Mailing Address 891 W Bonita Ave

City State Zip Code  
Claremont CA 91711-4115

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25862

Amount of Each Receipt this Period  
.....100.00

Earmark to Eric Massa (NY-09H)

**[MEMO ITEM]**

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

Mailing Address 891 W Bonita Ave

City State Zip Code  
Claremont CA 91711-4115

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25863

Amount of Each Receipt this Period  
.....100.00

Earmark to Patty Wetterling (MN-06H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Stuart Oskamp

Mailing Address 891 W Bonita Ave

City State Zip Code  
Claremont CA 91711-4115

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.25864

Amount of Each Receipt this Period  
.....100.00

Earmark to John Cranley (OH-01H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 313 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Stuart Oskamp

Mailing Address 891 W Bonita Ave

City State Zip Code  
Claremont CA 91711-4115

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

**Transaction ID:** SA11A1.25865

Amount of Each Receipt this Period  
100.00

Earmark to Jerry McNerny (CA-11H)

**[MEMO ITEM]**

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

Mailing Address 891 W Bonita Ave

City State Zip Code  
Claremont CA 91711-4115

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

**Transaction ID:** SA11A1.25866

Amount of Each Receipt this Period  
100.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Janet E Oswain

Mailing Address 574 Crane Ave

City State Zip Code  
Pittsfield MA 01201-1706

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

**Transaction ID:** SA11A1.25868

Amount of Each Receipt this Period  
20.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 314 / 932  
(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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Janet E Oswain

Mailing Address 574 Crane Ave

City State Zip Code  
Pittsfield MA 01201-1706

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
MM / DD / YYYY  
09 / 15 / 2006

Transaction ID: SA11A1.25869

Amount of Each Receipt this Period  
20.00

Earmark to Kent Conrad (N-D-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Janet E Oswain

Mailing Address 574 Crane Ave

City State Zip Code  
Pittsfield MA 01201-1706

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
MM / DD / YYYY  
09 / 15 / 2006

Transaction ID: SA11A1.25870

Amount of Each Receipt this Period  
20.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Janet E Oswain

Mailing Address 574 Crane Ave

City State Zip Code  
Pittsfield MA 01201-1706

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
MM / DD / YYYY  
09 / 15 / 2006

Transaction ID: SA11A1.25871

Amount of Each Receipt this Period  
20.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 315 / 932  
(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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

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

Mailing Address 7936 Redondo Ct

City State Zip Code  
Darien IL 60561-1633

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25872

Amount of Each Receipt this Period  
25.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

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

Mailing Address 7936 Redondo Ct

City State Zip Code  
Darien IL 60561-1633

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25873

Amount of Each Receipt this Period  
25.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Lawrence L Parrish

Mailing Address 400 Seabury Dr Apt 3106

City State Zip Code  
Bloomfield CT 06002-2666

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
850.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.27607

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	200.00
<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 316 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Daniel Payne Mailing Address 52 Saratoga City Newport Beach State CA Zip Code 92660 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.25874 Amount of Each Receipt this Period 50.00 Earmark to Bob Casey (PA-00S) <b>[MEMO ITEM]</b>
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	

<b>B.</b> Full Name (Last, First, Middle Initial) Helen L Pedotti Mailing Address 1915 Laguna Street City Santa Barbara State CA Zip Code 93101-1013 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.27579 Amount of Each Receipt this Period 500.00
Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1250.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Helen L Pedotti Mailing Address 1915 Laguna Street City Santa Barbara State CA Zip Code 93101-1013 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.27606 Amount of Each Receipt this Period 250.00
Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 1500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>750.00</b>
<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 317 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Ronald A Pelech

Mailing Address 311 N Macnab Dr Apt 8

City State Zip Code  
Nogales AZ 85621-2097

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25875

Amount of Each Receipt this Period  
35.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Mary Carolyn Perry

Mailing Address 12 632 Tustin St.

City State Zip Code  
Poway CA 92064

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25878

Amount of Each Receipt this Period  
25.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Mary Carolyn Perry

Mailing Address 12 632 Tustin St.

City State Zip Code  
Poway CA 92064

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 29 / 2006

Transaction ID: SA11A1.25877

Amount of Each Receipt this Period  
30.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 318 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Nancy Pine		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address 3445 Ellington Villa Dr		Transaction ID: SA11A1.25879	
City Altadena	State CA	Zip Code 91001-1422	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bernie Sanders (VT-00S)	
Name of Employer Self-employed	Occupation Researcher	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Nancy Pine		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address 3445 Ellington Villa Dr		Transaction ID: SA11A1.25880	
City Altadena	State CA	Zip Code 91001-1422	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Benjamin Cardin (MD-00S)	
Name of Employer Self-employed	Occupation Researcher	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Nancy Pine		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address 3445 Ellington Villa Dr		Transaction ID: SA11A1.25881	
City Altadena	State CA	Zip Code 91001-1422	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Ned Lamont (CT-00S)	
Name of Employer Self-employed	Occupation Researcher	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 319 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Nancy Pine		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address 3445 Ellington Villa Dr		Transaction ID: SA11A1.25882	
City State Zip Code Altadena CA 91001-1422	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to John Tester (M-T-00S)	
Name of Employer Self-employed Occupation Researcher	[MEMO ITEM]		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Nancy Pine		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address 3445 Ellington Villa Dr		Transaction ID: SA11A1.25883	
City State Zip Code Altadena CA 91001-1422	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Sherrod Brown (OH-00S)	
Name of Employer Self-employed Occupation Researcher	[MEMO ITEM]		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Jeffrey M Pines		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6	
Mailing Address 395 Riverside Dr Apt. 10A		Transaction ID: SA11A1.25885	
City State Zip Code New York NY 10025-1891	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bob Casey (PA-00S)	
Name of Employer Occupation	[MEMO ITEM]		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 320 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Johanna M Plaut		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 125 Red Gate Ln		Transaction ID: SA11A1.25887	
City Amherst	State MA	Amount of Each Receipt this Period 300.00	
Zip Code 01002-1844		Earmark to Bob Casey (PA-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer Self-employed	Occupation Homemaker	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ .00			

Full Name (Last, First, Middle Initial) <b>B.</b> Johanna M Plaut		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 125 Red Gate Ln		Transaction ID: SA11A1.25888	
City Amherst	State MA	Amount of Each Receipt this Period 300.00	
Zip Code 01002-1844		Earmark to John Tester (M-T-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer Self-employed	Occupation Homemaker	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ .00			

Full Name (Last, First, Middle Initial) <b>C.</b> Johanna M Plaut		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 125 Red Gate Ln		Transaction ID: SA11A1.25889	
City Amherst	State MA	Amount of Each Receipt this Period 300.00	
Zip Code 01002-1844		Earmark to Bob Menendez (NJ-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer Self-employed	Occupation Homemaker	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ .00			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 321 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Johanna M Plaut		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 125 Red Gate Ln		Transaction ID: SA11A1.25890	
City Amherst	State MA	Amount of Each Receipt this Period 300.00	
Zip Code 01002-1844		Earmark to Robert C. Byrd (WV-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer Self-employed	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Robert Plonsey		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 750 Weaver Dairy Rd Apt 108		Transaction ID: SA11A1.25891	
City Chapel Hill	State NC	Amount of Each Receipt this Period 50.00	
Zip Code 27514-1439		Earmark to Bruce Braley (IA-01H)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Gene Pokorny		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 384 Marlborough St		Transaction ID: SA11A1.25892	
City Boston	State MA	Amount of Each Receipt this Period 100.00	
Zip Code 02115-1502		Earmark to Benjamin Cardin (MD-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 322 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Gene Pokorny

Mailing Address 384 Marlborough St

City State Zip Code  
Boston MA 02115-1502

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25893

Amount of Each Receipt this Period  
100.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

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

Mailing Address 384 Marlborough St

City State Zip Code  
Boston MA 02115-1502

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25894

Amount of Each Receipt this Period  
100.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Patricia L Pollak

Mailing Address PO Box 30308

City State Zip Code  
Flagstaff AZ 86003-0308

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25896

Amount of Each Receipt this Period  
20.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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: <span style="float: right;">PAGE 323 / 932</span> (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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

<b>A.</b> Full Name (Last, First, Middle Initial) Patricia L Pollak Mailing Address PO Box 30308 City State Zip Code <b>Flagstaff AZ 86003-0308</b> FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <b>.00</b>	Date of Receipt <table border="1" style="width: 100%;"> <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>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <b>Transaction ID: SA11A1.25897</b> Amount of Each Receipt this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: right;">20.00</td> </tr> </table> Earmark to Robert C. Byrd (WV-00S) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	5		2	0	0	6	20.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		2	5		2	0	0	6													
20.00																						

<b>B.</b> Full Name (Last, First, Middle Initial) Robert E Pope Mailing Address 7910 W Cortland St City State Zip Code <b>Elmwood Park IL 60707-3530</b> FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <b>.00</b>	Date of Receipt <table border="1" style="width: 100%;"> <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>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <b>Transaction ID: SA11A1.25899</b> Amount of Each Receipt this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: right;">25.00</td> </tr> </table> Earmark to Diane Farrell (CT-04H) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	7		2	0	0	6	25.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		2	7		2	0	0	6													
25.00																						

<b>C.</b> Full Name (Last, First, Middle Initial) Robert E Pope Mailing Address 7910 W Cortland St City State Zip Code <b>Elmwood Park IL 60707-3530</b> FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <b>.00</b>	Date of Receipt <table border="1" style="width: 100%;"> <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>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <b>Transaction ID: SA11A1.25900</b> Amount of Each Receipt this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: right;">25.00</td> </tr> </table> Earmark to Dan Maffei (NY-25H) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	7		2	0	0	6	25.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		2	7		2	0	0	6													
25.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<table border="1" style="width: 100%;"> <tr> <td style="text-align: right;"><b>0.00</b></td> </tr> </table>	<b>0.00</b>
<b>0.00</b>		
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<table border="1" style="width: 100%;"> <tr> <td style="text-align: right;"> </td> </tr> </table>	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 324 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Robert E Pope

Mailing Address 7910 W Cortland St

City State Zip Code  
Elmwood Park IL 60707-3530

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.25901

Amount of Each Receipt this Period  
25.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

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

Mailing Address 320 Central Park W Apt 6A

City State Zip Code  
New York NY 10025-7659

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.25902

Amount of Each Receipt this Period  
40.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Peggy Porder

Mailing Address 320 Central Park W Apt 6A

City State Zip Code  
New York NY 10025-7659

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.25903

Amount of Each Receipt this Period  
40.00

Earmark to Debbie Stabenow (MI-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

**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 325 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Peggy Porder  
Mailing Address 320 Central Park W Apt 6A  
City State Zip Code  
New York NY 10025-7659  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006  
Transaction ID: SA11A1.25904  
Amount of Each Receipt this Period  
40.00  
Earmark to John Tester (M-T-00S)  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
William L Porter  
Mailing Address 10 Oakridge Ave  
City State Zip Code  
Natick MA 01760-2910  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006  
Transaction ID: SA11A1.25906  
Amount of Each Receipt this Period  
10.00  
Earmark to Jerry McNerny (CA-11H)  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
William L Porter  
Mailing Address 10 Oakridge Ave  
City State Zip Code  
Natick MA 01760-2910  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006  
Transaction ID: SA11A1.25907  
Amount of Each Receipt this Period  
10.00  
Earmark to Bruce Braley (IA-01H)  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00  
**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 326 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
William L Porter

Mailing Address 10 Oakridge Ave

City State Zip Code  
Natick MA 01760-2910

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

**Transaction ID:** SA11A1.25908

Amount of Each Receipt this Period  
10.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
William L Porter

Mailing Address 10 Oakridge Ave

City State Zip Code  
Natick MA 01760-2910

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

**Transaction ID:** SA11A1.25909

Amount of Each Receipt this Period  
10.00

Earmark to Eric Massa (NY-09H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
William L Porter

Mailing Address 10 Oakridge Ave

City State Zip Code  
Natick MA 01760-2910

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

**Transaction ID:** SA11A1.25910

Amount of Each Receipt this Period  
10.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 327 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> William L Porter		Date of Receipt M M / D D / Y Y Y Y Y 09 / 27 / 2006	
Mailing Address 10 Oakridge Ave		Transaction ID: SA11A1.25911	
City Natick	State MA	Amount of Each Receipt this Period 10.00	
Zip Code 01760-2910		Earmark to Joseph A. Sestak (PA-07H)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> William L Porter		Date of Receipt M M / D D / Y Y Y Y Y 09 / 27 / 2006	
Mailing Address 10 Oakridge Ave		Transaction ID: SA11A1.25912	
City Natick	State MA	Amount of Each Receipt this Period 10.00	
Zip Code 01760-2910		Earmark to Dan Maffei (NY-25H)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> William L Porter		Date of Receipt M M / D D / Y Y Y Y Y 09 / 27 / 2006	
Mailing Address 10 Oakridge Ave		Transaction ID: SA11A1.25913	
City Natick	State MA	Amount of Each Receipt this Period 10.00	
Zip Code 01760-2910		Earmark to Diane Farrell (CT-04H)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 328 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> William L Porter		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 10 Oakridge Ave		Transaction ID: SA11A1.25914	
City Natick	State MA	Zip Code 01760-2910	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C		Earmark to Sherrod Brown (OH-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> William L Porter		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 10 Oakridge Ave		Transaction ID: SA11A1.25915	
City Natick	State MA	Zip Code 01760-2910	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C		Earmark to John Tester (M-T-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> William L Porter		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 10 Oakridge Ave		Transaction ID: SA11A1.25916	
City Natick	State MA	Zip Code 01760-2910	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C		Earmark to Bob Menendez (NJ-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 329 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
William L Porter

Mailing Address 10 Oakridge Ave

City State Zip Code  
Natick MA 01760-2910

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

**Transaction ID:** SA11A1.25917

Amount of Each Receipt this Period  
10.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
William L Porter

Mailing Address 10 Oakridge Ave

City State Zip Code  
Natick MA 01760-2910

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

**Transaction ID:** SA11A1.25918

Amount of Each Receipt this Period  
10.00

Earmark to Patty Wetterling (MN-06H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
William L Porter

Mailing Address 10 Oakridge Ave

City State Zip Code  
Natick MA 01760-2910

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

**Transaction ID:** SA11A1.25919

Amount of Each Receipt this Period  
10.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 330 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> William L Porter		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 10 Oakridge Ave		Transaction ID: SA11A1.25920	
City Natick	State MA	Zip Code 01760-2910	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to John Cranley (OH-01H)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Neal Potter		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2006	
Mailing Address 6801 Brookville Rd		Transaction ID: SA11A1.25921	
City Chevy Chase	State MD	Zip Code 20815-3267	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bob Casey (PA-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Barry H Powell		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 1914 Cherokee Dr		Transaction ID: SA11A1.25922	
City Jackson	State MS	Zip Code 39211-6508	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to John Tester (M-T-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 331 / 932
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Barry H Powell

Mailing Address 1914 Cherokee Dr

City State Zip Code  
Jackson MS 39211-6508

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25923

Amount of Each Receipt this Period  
100.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

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

Mailing Address 95-692 Maiaku Street

City State Zip Code  
Mililani HI 96789

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 29 / 2006

Transaction ID: SA11A1.25925

Amount of Each Receipt this Period  
50.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Theresa P Pretlow

Mailing Address 3061 Chadbourne Rd

City State Zip Code  
Shaker Heights OH 44120-2446

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

Name of Employer Information Requested Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25927

Amount of Each Receipt this Period  
1000.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 332 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Thomas G Pretlow

Mailing Address 3061 Chadbourne Rd

City State Zip Code  
Shaker Hts OH 44120-2446

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

Name of Employer Case Western Reserve Univ. Occupation Physician and Professor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25928

Amount of Each Receipt this Period  
1000.00

Earmark to Patricia Matrid (NM-01H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Thomas G Pretlow

Mailing Address 3061 Chadbourne Rd

City State Zip Code  
Shaker Hts OH 44120-2446

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

Name of Employer Case Western Reserve Univ. Occupation Physician and Professor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25929

Amount of Each Receipt this Period  
2000.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Thomas G Pretlow

Mailing Address 3061 Chadbourne Rd

City State Zip Code  
Shaker Hts OH 44120-2446

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

Name of Employer Case Western Reserve Univ. Occupation Physician and Professor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25930

Amount of Each Receipt this Period  
2000.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 333 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Thomas G Pretlow		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 3061 Chadbourne Rd		Transaction ID: SA11A1.25931
City State Zip Code Shaker Hts OH 44120-2446	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Earmark to Diane Farrell (CT-04H)	
Name of Employer Case Western Reserve Univ. Occupation Physician and Professor	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) <b>B.</b> Thomas G Pretlow		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 3061 Chadbourne Rd		Transaction ID: SA11A1.25932
City State Zip Code Shaker Hts OH 44120-2446	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Earmark to Dan Maffei (NY-25H)	
Name of Employer Case Western Reserve Univ. Occupation Physician and Professor	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) <b>C.</b> Thomas G Pretlow		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 3061 Chadbourne Rd		Transaction ID: SA11A1.25933
City State Zip Code Shaker Hts OH 44120-2446	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Earmark to Bob Menendez (NJ-00S)	
Name of Employer Case Western Reserve Univ. Occupation Physician and Professor	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 334 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Thomas G Pretlow

Mailing Address 3061 Chadbourne Rd

City State Zip Code  
Shaker Hts OH 44120-2446

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

Name of Employer Case Western Reserve Univ. Occupation Physician and Professor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25934

Amount of Each Receipt this Period  
2000.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Thomas G Pretlow

Mailing Address 3061 Chadbourne Rd

City State Zip Code  
Shaker Hts OH 44120-2446

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

Name of Employer Case Western Reserve Univ. Occupation Physician and Professor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25935

Amount of Each Receipt this Period  
2000.00

Earmark to Zack Space (OH-19H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Thomas G Pretlow

Mailing Address 3061 Chadbourne Rd

City State Zip Code  
Shaker Hts OH 44120-2446

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

Name of Employer Case Western Reserve Univ. Occupation Physician and Professor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25936

Amount of Each Receipt this Period  
1000.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 335 / 932
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Thomas G Pretlow		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 3061 Chadbourne Rd		Transaction ID: SA11A1.25937
City State Zip Code Shaker Hts OH 44120-2446	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Earmark to Eric Massa (NY-09H)	
Name of Employer Case Western Reserve Univ. Occupation Physician and Professor	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) <b>B.</b> Thomas G Pretlow		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 3061 Chadbourne Rd		Transaction ID: SA11A1.25939
City State Zip Code Shaker Hts OH 44120-2446	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Earmark to Patty Wetterling (MN-06H)	
Name of Employer Case Western Reserve Univ. Occupation Physician and Professor	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) <b>C.</b> Thomas G Pretlow		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006
Mailing Address 3061 Chadbourne Rd		Transaction ID: SA11A1.25938
City State Zip Code Shaker Hts OH 44120-2446	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C	Earmark to Patrick Muprhy (PA-08H)	
Name of Employer Case Western Reserve Univ. Occupation Physician and Professor	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 336 / 932
	<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
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	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. James L Pyle</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 4301 W University Ave		Transaction ID: SA11A1.25940	
City Muncie	State IN	Zip Code 47304-3659	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to John Tester (M-T-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B. Guy C Quinlan</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 340 East 80 Street		Transaction ID: SA11A1.25941	
City New York	State NY	Zip Code 10021	Amount of Each Receipt this Period 35.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bob Menendez (NJ-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C. Daniel J Quinn</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 10 Bear Paw		Transaction ID: SA11A1.25942	
City Portola Vally	State CA	Zip Code 94028-8014	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to John Tester (M-T-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 337 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Daniel J Quinn		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 10 Bear Paw		<b>Transaction ID:</b> SA11A1.25943	
City Portola Vally	State CA	Amount of Each Receipt this Period 200.00	
Zip Code 94028-8014		Earmark to Joseph A. Sestak (PA-07H)	
FEC ID number of contributing federal political committee. C		<b>[MEMO ITEM]</b>	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>B.</b> Full Name (Last, First, Middle Initial) Clifton W Ragsdale		Date of Receipt M M / D D / Y Y Y Y Y 09 / 25 / 2006	
Mailing Address 1201 E Madison Park		<b>Transaction ID:</b> SA11A1.25944	
City Chicago	State IL	Amount of Each Receipt this Period 50.00	
Zip Code 60615-2952		Earmark to Diane Farrell (CT-04H)	
FEC ID number of contributing federal political committee. C		<b>[MEMO ITEM]</b>	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>C.</b> Full Name (Last, First, Middle Initial) Clifton W Ragsdale		Date of Receipt M M / D D / Y Y Y Y Y 09 / 25 / 2006	
Mailing Address 1201 E Madison Park		<b>Transaction ID:</b> SA11A1.25945	
City Chicago	State IL	Amount of Each Receipt this Period 50.00	
Zip Code 60615-2952		Earmark to Dan Maffei (NY-25H)	
FEC ID number of contributing federal political committee. C		<b>[MEMO ITEM]</b>	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 338 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

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

Mailing Address 175 Partridge St

City State Zip Code  
Covington LA 70433

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2006

Transaction ID: SA11A1.25947

Amount of Each Receipt this Period  
25.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Carol J Ramseier

Mailing Address 3423 Monterey Ave

City State Zip Code  
Davis CA 95618-4935

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25952

Amount of Each Receipt this Period  
50.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Carol J Ramseier

Mailing Address 3423 Monterey Ave

City State Zip Code  
Davis CA 95618-4935

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.25948

Amount of Each Receipt this Period  
50.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 339 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Carol J Ramseier

Mailing Address 3423 Monterey Ave

City State Zip Code  
Davis CA 95618-4935

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.25949

Amount of Each Receipt this Period  
.....50.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Carol J Ramseier

Mailing Address 3423 Monterey Ave

City State Zip Code  
Davis CA 95618-4935

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.25950

Amount of Each Receipt this Period  
.....50.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Carol J Ramseier

Mailing Address 3423 Monterey Ave

City State Zip Code  
Davis CA 95618-4935

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.25951

Amount of Each Receipt this Period  
.....50.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 340 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Carol J Ramseier

Mailing Address 3423 Monterey Ave

City State Zip Code  
Davis CA 95618-4935

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 27 2006

Transaction ID: SA11A1.25953

Amount of Each Receipt this Period  
50.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Jack D Reed

Mailing Address 5532 S Shore Dr Apt 20F

City State Zip Code  
Chicago IL 60637-1999

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 15 2006

Transaction ID: SA11A1.25954

Amount of Each Receipt this Period  
100.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

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

Mailing Address 5532 S Shore Dr Apt 20F

City State Zip Code  
Chicago IL 60637-1999

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 15 2006

Transaction ID: SA11A1.25955

Amount of Each Receipt this Period  
100.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 341 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Jack D Reed  
 Mailing Address 5532 S Shore Dr Apt 20F  
 City State Zip Code  
 Chicago IL 60637-1999  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006  
**Transaction ID:** SA11A1.25956  
 Amount of Each Receipt this Period  
 100.00  
 Earmark to Daniel Akada (HI-00S)  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Jack D Reed  
 Mailing Address 5532 S Shore Dr Apt 20F  
 City State Zip Code  
 Chicago IL 60637-1999  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006  
**Transaction ID:** SA11A1.25957  
 Amount of Each Receipt this Period  
 100.00  
 Earmark to Ned Lamont (CT-00S)  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Jack D Reed  
 Mailing Address 5532 S Shore Dr Apt 20F  
 City State Zip Code  
 Chicago IL 60637-1999  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006  
**Transaction ID:** SA11A1.25958  
 Amount of Each Receipt this Period  
 100.00  
 Earmark to John Tester (M-T-00S)  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00  
**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 342 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Jack D Reed

Mailing Address 5532 S Shore Dr Apt 20F

City State Zip Code  
Chicago IL 60637-1999

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

**Transaction ID:** SA11A1.25959

Amount of Each Receipt this Period  
.....100.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Jack D Reed

Mailing Address 5532 S Shore Dr Apt 20F

City State Zip Code  
Chicago IL 60637-1999

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

**Transaction ID:** SA11A1.25960

Amount of Each Receipt this Period  
.....100.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

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

Mailing Address 5532 S Shore Dr Apt 20F

City State Zip Code  
Chicago IL 60637-1999

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

**Transaction ID:** SA11A1.25965

Amount of Each Receipt this Period  
.....100.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 343 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Jack D Reed		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6
Mailing Address 5532 S Shore Dr Apt 20F		Transaction ID: SA11A1.25961
City Chicago State IL Zip Code 60637-1999	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00
Name of Employer	Occupation	Earmark to Joseph A. Sestak (PA-07H)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) B. Jack D Reed		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6
Mailing Address 5532 S Shore Dr Apt 20F		Transaction ID: SA11A1.25962
City Chicago State IL Zip Code 60637-1999	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00
Name of Employer	Occupation	Earmark to Bruce Braley (IA-01H)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) C. Jack D Reed		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6
Mailing Address 5532 S Shore Dr Apt 20F		Transaction ID: SA11A1.25963
City Chicago State IL Zip Code 60637-1999	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00
Name of Employer	Occupation	Earmark to Dan Maffei (NY-25H)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 344 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. Jack D Reed</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address 5532 S Shore Dr Apt 20F		Transaction ID: SA11A1.25964	
City State Zip Code Chicago IL 60637-1999	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Earmark to Diane Farrell (CT-04H)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B. Charles T Reeser</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 5 / 2 0 0 6	
Mailing Address 124 Brennan St Apt A		Transaction ID: SA11A1.25966	
City State Zip Code Watsonville CA 95076-4465	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Earmark to Ned Lamont (CT-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C. Eugene M Renkin</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 5 / 2 0 0 6	
Mailing Address 1515 Shasta Dr Apt 1204		Transaction ID: SA11A1.25968	
City State Zip Code Davis CA 95616-6676	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Earmark to Patty Wetterling (MN-06H)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 345 / 932  
(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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Eugene M Renkin

Mailing Address 1515 Shasta Dr Apt 1204

City State Zip Code  
Davis CA 95616-6676

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25970

Amount of Each Receipt this Period  
50.00

Earmark to Eric Massa (NY-09H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Eugene M Renkin

Mailing Address 1515 Shasta Dr Apt 1204

City State Zip Code  
Davis CA 95616-6676

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25967

Amount of Each Receipt this Period  
100.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Eugene M Renkin

Mailing Address 1515 Shasta Dr Apt 1204

City State Zip Code  
Davis CA 95616-6676

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25972

Amount of Each Receipt this Period  
100.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

**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 346 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Eugene M Renkin

Mailing Address 1515 Shasta Dr Apt 1204

City State Zip Code  
Davis CA 95616-6676

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.25969

Amount of Each Receipt this Period  
50.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Eugene M Renkin

Mailing Address 1515 Shasta Dr Apt 1204

City State Zip Code  
Davis CA 95616-6676

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.25971

Amount of Each Receipt this Period  
50.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Stephen R Reynolds

Mailing Address RR 2

City State Zip Code  
Middlebury VT 05753

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25974

Amount of Each Receipt this Period  
50.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 347 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) George G Rhoads Mailing Address 240 New York Ave City New Brunswick State NJ Zip Code 08901-1732 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006 <b>Transaction ID:</b> SA11A1.25976 Amount of Each Receipt this Period 100.00 Earmark to Bob Menendez (NJ-00S)
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>

<b>B.</b> Full Name (Last, First, Middle Initial) Harry E Rice Mailing Address 7208 E Metz St City Long Beach State CA Zip Code 90808-4350 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.25978 Amount of Each Receipt this Period 50.00 Earmark to Daniel Akada (HI-00S)
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>

<b>C.</b> Full Name (Last, First, Middle Initial) Frederic M Richards Mailing Address 69 Andrews Rd City Guilford State CT Zip Code 06437-3715 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006 <b>Transaction ID:</b> SA11A1.25982 Amount of Each Receipt this Period 200.00 Earmark to Bernie Sanders (VT-00S)
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 348 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Frederic M Richards

Mailing Address 69 Andrews Rd

City State Zip Code  
Guilford CT 06437-3715

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.25983

Amount of Each Receipt this Period  
200.00

Earmark to Lois Murphy (P-A-06H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Frederic M Richards

Mailing Address 69 Andrews Rd

City State Zip Code  
Guilford CT 06437-3715

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.25984

Amount of Each Receipt this Period  
200.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Frederic M Richards

Mailing Address 69 Andrews Rd

City State Zip Code  
Guilford CT 06437-3715

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.25985

Amount of Each Receipt this Period  
200.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 349 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Frederic M Richards

Mailing Address 69 Andrews Rd

City State Zip Code  
Guilford CT 06437-3715

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25986

Amount of Each Receipt this Period  
.....200.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Frederic M Richards

Mailing Address 69 Andrews Rd

City State Zip Code  
Guilford CT 06437-3715

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.25987

Amount of Each Receipt this Period  
.....200.00

Earmark to Peter Welch (V-T-01H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Frederic M Richards

Mailing Address 69 Andrews Rd

City State Zip Code  
Guilford CT 06437-3715

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.25980

Amount of Each Receipt this Period  
.....200.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>0.00</b>
<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 350 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Frederic M Richards

Mailing Address 69 Andrews Rd

City Guilford State CT Zip Code 06437-3715

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 27 / 2006

Transaction ID: SA11A1.25981

Amount of Each Receipt this Period  
 200.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Harry I Riegel

Mailing Address 40 Cibola Dr

City Sedona State AZ Zip Code 86336-3565

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25988

Amount of Each Receipt this Period  
 50.00

Earmark to Lois Murphy (P-A-06H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Harry I Riegel

Mailing Address 40 Cibola Dr

City Sedona State AZ Zip Code 86336-3565

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.25989

Amount of Each Receipt this Period  
 50.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 351 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Harry I Riegel Mailing Address 40 Cibola Dr City Sedona State AZ Zip Code 86336-3565 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <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>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.25990 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Earmark to John Tester (M-T-00S) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0	6	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	5		2	0	0	6														
100.00																							
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>.00</td> </tr> </table>		.00																					
.00																							

<b>B.</b> Full Name (Last, First, Middle Initial) Harry I Riegel Mailing Address 40 Cibola Dr City Sedona State AZ Zip Code 86336-3565 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <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>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.25991 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Earmark to Bob Menendez (NJ-00S) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0	6	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	5		2	0	0	6														
100.00																							
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>.00</td> </tr> </table>		.00																					
.00																							

<b>C.</b> Full Name (Last, First, Middle Initial) Susan F Ritchie Mailing Address 17 Cobble Rd City Salisbury State CT Zip Code 06068-1501 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <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>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.25992 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Earmark to Diane Farrell (CT-04H) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	5		2	0	0	6	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	5		2	0	0	6														
50.00																							
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>.00</td> </tr> </table>		.00																					
.00																							

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>0.00</b>
<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 352 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. William Rittenberg</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006	
Mailing Address PO Box 867		Transaction ID: SA11A1.25993	
City East Lansing	State MI	Zip Code 48826	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Earmark to Robert C. Byrd (WV-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B. William Rittenberg</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006	
Mailing Address PO Box 867		Transaction ID: SA11A1.25994	
City East Lansing	State MI	Zip Code 48826	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Earmark to Bob Menendez (NJ-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C. William Rittenberg</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006	
Mailing Address PO Box 867		Transaction ID: SA11A1.25995	
City East Lansing	State MI	Zip Code 48826	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Earmark to Sherrod Brown (OH-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 353 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Robert N Roadcap

Mailing Address 2772 Joseph Ave Apt 2

City State Zip Code  
Campbell CA 95008-6236

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25996

Amount of Each Receipt this Period  
50.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

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

Mailing Address 3152 Gracefield Rd Apt 514

City State Zip Code  
Silver Spring MD 20904-0801

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25997

Amount of Each Receipt this Period  
25.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Robert S Rochlin

Mailing Address 3152 Gracefield Rd Apt 514

City State Zip Code  
Silver Spring MD 20904-0801

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.25998

Amount of Each Receipt this Period  
25.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 354 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Daniel T Rodgers

Mailing Address 32 Turner Ct

City State Zip Code  
Princeton NJ 08540-3426

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26000

Amount of Each Receipt this Period  
200.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Daniel T Rodgers

Mailing Address 32 Turner Ct

City State Zip Code  
Princeton NJ 08540-3426

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26001

Amount of Each Receipt this Period  
200.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Daniel T Rodgers

Mailing Address 32 Turner Ct

City State Zip Code  
Princeton NJ 08540-3426

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26002

Amount of Each Receipt this Period  
200.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 355 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Daniel T Rodgers

Mailing Address 32 Turner Ct

City State Zip Code  
Princeton NJ 08540-3426

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26003

Amount of Each Receipt this Period  
200.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Lorraine K Rogers

Mailing Address 1 Converse Rd

City State Zip Code  
Bolton CT 06043-7510

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26004

Amount of Each Receipt this Period  
50.00

Earmark to Patty Wetterling (MN-06H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Lorraine K Rogers

Mailing Address 1 Converse Rd

City State Zip Code  
Bolton CT 06043-7510

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26005

Amount of Each Receipt this Period  
50.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 356 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Lorraine K Rogers		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 1 Converse Rd		Transaction ID: SA11A1.26006	
City Bolton	State CT	Zip Code 06043-7510	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Earmark to Julia Carson (IN-07H)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Lorraine K Rogers		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 1 Converse Rd		Transaction ID: SA11A1.26007	
City Bolton	State CT	Zip Code 06043-7510	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Earmark to Jerry McNerny (CA-11H)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Lorraine K Rogers		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006	
Mailing Address 1 Converse Rd		Transaction ID: SA11A1.26008	
City Bolton	State CT	Zip Code 06043-7510	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Earmark to John Tester (M-T-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 357 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Lorraine K Rogers Mailing Address 1 Converse Rd City State Zip Code Bolton CT 06043-7510 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.26009 Amount of Each Receipt this Period 50.00 Earmark to Sherrod Brown (OH-00S) <b>[MEMO ITEM]</b>
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>B.</b> Full Name (Last, First, Middle Initial) Ida Mae Rollin Mailing Address 2509 Hillside Dr City State Zip Code Norristown PA 19403-3612 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006 <b>Transaction ID:</b> SA11A1.26011 Amount of Each Receipt this Period 25.00 Earmark to Robert C. Byrd (WV-00S) <b>[MEMO ITEM]</b>
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>C.</b> Full Name (Last, First, Middle Initial) Peter G Roper Mailing Address 210 Pequot Ave City State Zip Code Mystic CT 06355-1740 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.26013 Amount of Each Receipt this Period 20.00 Earmark to Ned Lamont (CT-00S) <b>[MEMO ITEM]</b>
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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: <span style="float: right;">PAGE 358 / 932</span> (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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

<b>A.</b> Full Name (Last, First, Middle Initial) Peter G Roper Mailing Address 210 Pequot Ave City State Zip Code Mystic CT 06355-1740 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00	Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006 <b>Transaction ID:</b> SA11A1.26012 Amount of Each Receipt this Period 5.00 Earmark to Joseph A. Sestak (PA-07H) <b>[MEMO ITEM]</b>
--	---

<b>B.</b> Full Name (Last, First, Middle Initial) Peter G Roper Mailing Address 210 Pequot Ave City State Zip Code Mystic CT 06355-1740 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00	Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006 <b>Transaction ID:</b> SA11A1.26014 Amount of Each Receipt this Period 5.00 Earmark to Dan Maffei (NY-25H) <b>[MEMO ITEM]</b>
--	---

<b>C.</b> Full Name (Last, First, Middle Initial) Peter G Roper Mailing Address 210 Pequot Ave City State Zip Code Mystic CT 06355-1740 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00	Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006 <b>Transaction ID:</b> SA11A1.26015 Amount of Each Receipt this Period 5.00 Earmark to Bruce Braley (IA-01H) <b>[MEMO ITEM]</b>
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<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 359 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Peter G Roper

Mailing Address 210 Pequot Ave

City State Zip Code  
Mystic CT 06355-1740

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.26016

Amount of Each Receipt this Period  
5.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

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

Mailing Address 1485 Gulf of Mexico Dr Unit A207

City State Zip Code  
Longboat Key FL 34228-3464

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.26018

Amount of Each Receipt this Period  
500.00

Earmark to Zack Space (OH-19H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Charles Rosen

Mailing Address 1485 Gulf of Mexico Dr Unit A207

City State Zip Code  
Longboat Key FL 34228-3464

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.26019

Amount of Each Receipt this Period  
500.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 360 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Charles Rosen

Mailing Address 1485 Gulf of Mexico Dr Unit A207

City State Zip Code  
Longboat Key FL 34228-3464

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

**Transaction ID:** SA11A1.26020

Amount of Each Receipt this Period  
500.00

Earmark to John Cranley (OH-01H)

**[MEMO ITEM]**

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

Mailing Address 1485 Gulf of Mexico Dr Unit A207

City State Zip Code  
Longboat Key FL 34228-3464

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

**Transaction ID:** SA11A1.26021

Amount of Each Receipt this Period  
500.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Charles Rosen

Mailing Address 1485 Gulf of Mexico Dr Unit A207

City State Zip Code  
Longboat Key FL 34228-3464

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

**Transaction ID:** SA11A1.26022

Amount of Each Receipt this Period  
500.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

**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 361 / 932
	<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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

<b>A.</b> Full Name (Last, First, Middle Initial) Charles Rosen		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address 1485 Gulf of Mexico Dr Unit A207		<b>Transaction ID:</b> SA11A1.26023	
City State Zip Code Longboat Key FL 34228-3464	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Earmark to Bruce Braley (IA-01H)		
Name of Employer Retired Occupation Retired	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>B.</b> Full Name (Last, First, Middle Initial) Charles Rosen		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address 1485 Gulf of Mexico Dr Unit A207		<b>Transaction ID:</b> SA11A1.26024	
City State Zip Code Longboat Key FL 34228-3464	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Earmark to Bob Casey (PA-00S)		
Name of Employer Retired Occupation Retired	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>C.</b> Full Name (Last, First, Middle Initial) Charles Rosen		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address 1485 Gulf of Mexico Dr Unit A207		<b>Transaction ID:</b> SA11A1.26025	
City State Zip Code Longboat Key FL 34228-3464	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Earmark to Sherrod Brown (OH-00S)		
Name of Employer Retired Occupation Retired	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 362 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Charles Rosen

Mailing Address 1485 Gulf of Mexico Dr Unit A207

City State Zip Code  
Longboat Key FL 34228-3464

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 25 / 2006

Transaction ID: SA11A1.26027

Amount of Each Receipt this Period  
500.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

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

Mailing Address 1485 Gulf of Mexico Dr Unit A207

City State Zip Code  
Longboat Key FL 34228-3464

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 27 / 2006

Transaction ID: SA11A1.26026

Amount of Each Receipt this Period  
500.00

Earmark to Michael Arcuri (NY-24H)

**[MEMO ITEM]**

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

Mailing Address 1712 Eldridge Ave W

City State Zip Code  
Roseville MN 55113-5604

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 15 / 2006

Transaction ID: SA11A1.26028

Amount of Each Receipt this Period  
25.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 363 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

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

Mailing Address 1712 Eldridge Ave W

City State Zip Code  
Roseville MN 55113-5604

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26029

Amount of Each Receipt this Period  
25.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Louis K Rue

Mailing Address 609 S Cherry St

City State Zip Code  
Hammond LA 70403-4205

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 16 / 2006

Transaction ID: SA11A1.26031

Amount of Each Receipt this Period  
10.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Klaus Ruedenberg

Mailing Address 2834 Ross Rd

City State Zip Code  
Ames IA 50014-4030

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26033

Amount of Each Receipt this Period  
35.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 364 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Klaus Ruedenberg

Mailing Address 2834 Ross Rd

City State Zip Code  
**Ames IA 50014-4030**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
09 / 27 / 2006

**Transaction ID: SA11A1.26034**

Amount of Each Receipt this Period  
30.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

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

Mailing Address 2834 Ross Rd

City State Zip Code  
**Ames IA 50014-4030**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
09 / 27 / 2006

**Transaction ID: SA11A1.26035**

Amount of Each Receipt this Period  
40.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Klaus Ruedenberg

Mailing Address 2834 Ross Rd

City State Zip Code  
**Ames IA 50014-4030**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
09 / 27 / 2006

**Transaction ID: SA11A1.26036**

Amount of Each Receipt this Period  
40.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

**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 365 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Klaus Ruedenberg

Mailing Address 2834 Ross Rd

City State Zip Code  
Ames IA 50014-4030

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 27 / 2006

Transaction ID: SA11A1.26037

Amount of Each Receipt this Period  
50.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

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

Mailing Address 2834 Ross Rd

City State Zip Code  
Ames IA 50014-4030

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 27 / 2006

Transaction ID: SA11A1.26038

Amount of Each Receipt this Period  
50.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Klaus Ruedenberg

Mailing Address 2834 Ross Rd

City State Zip Code  
Ames IA 50014-4030

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 27 / 2006

Transaction ID: SA11A1.26039

Amount of Each Receipt this Period  
40.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 366 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> William E Rupel		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 7200 Midvale Rd		Transaction ID: SA11A1.26040	
City Yakima	State WA	Zip Code 98908-9717	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		Earmark to Ned Lamont (CT-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> William E Rupel		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 7200 Midvale Rd		Transaction ID: SA11A1.26041	
City Yakima	State WA	Zip Code 98908-9717	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		Earmark to Bob Menendez (NJ-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> William E Rupel		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 7200 Midvale Rd		Transaction ID: SA11A1.26044	
City Yakima	State WA	Zip Code 98908-9717	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		Earmark to Daniel Akada (HI-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 367 / 932
<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> William E Rupel		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 7200 Midvale Rd		Transaction ID: SA11A1.26045	
City Yakima	State WA	Amount of Each Receipt this Period 20.00	
Zip Code 98908-9717		Earmark to Sherrod Brown (OH-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B.</b> William E Rupel		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 7200 Midvale Rd		Transaction ID: SA11A1.26046	
City Yakima	State WA	Amount of Each Receipt this Period 20.00	
Zip Code 98908-9717		Earmark to Benjamin Cardin (MD-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>C.</b> William E Rupel		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 7200 Midvale Rd		Transaction ID: SA11A1.26047	
City Yakima	State WA	Amount of Each Receipt this Period 20.00	
Zip Code 98908-9717		Earmark to Bernie Sanders (VT-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 368 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
William E Rupel

Mailing Address 7200 Midvale Rd

City State Zip Code  
Yakima WA 98908-9717

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26050

Amount of Each Receipt this Period  
20.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
William E Rupel

Mailing Address 7200 Midvale Rd

City State Zip Code  
Yakima WA 98908-9717

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26051

Amount of Each Receipt this Period  
20.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

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

Mailing Address 7200 Midvale Rd

City State Zip Code  
Yakima WA 98908-9717

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26042

Amount of Each Receipt this Period  
30.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>0.00</b>
<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 369 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
William E Rupel

Mailing Address 7200 Midvale Rd

City State Zip Code  
Yakima WA 98908-9717

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26043

Amount of Each Receipt this Period  
30.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
William E Rupel

Mailing Address 7200 Midvale Rd

City State Zip Code  
Yakima WA 98908-9717

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26048

Amount of Each Receipt this Period  
30.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

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

Mailing Address 7200 Midvale Rd

City State Zip Code  
Yakima WA 98908-9717

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26049

Amount of Each Receipt this Period  
30.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 370 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Sheroo M Rusby

Mailing Address 4900 27th St N

City State Zip Code  
Arlington VA 22207-2762

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.26052

Amount of Each Receipt this Period  
10.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Sheroo M Rusby

Mailing Address 4900 27th St N

City State Zip Code  
Arlington VA 22207-2762

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.26053

Amount of Each Receipt this Period  
10.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Sheroo M Rusby

Mailing Address 4900 27th St N

City State Zip Code  
Arlington VA 22207-2762

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.26054

Amount of Each Receipt this Period  
10.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 371 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Sheroo M Rusby

Mailing Address 4900 27th St N

City State Zip Code  
Arlington VA 22207-2762

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	6

Transaction ID: SA11A1.26055

Amount of Each Receipt this Period  
 10.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Sheroo M Rusby

Mailing Address 4900 27th St N

City State Zip Code  
Arlington VA 22207-2762

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	6

Transaction ID: SA11A1.26056

Amount of Each Receipt this Period  
 10.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Sheroo M Rusby

Mailing Address 4900 27th St N

City State Zip Code  
Arlington VA 22207-2762

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	6

Transaction ID: SA11A1.26057

Amount of Each Receipt this Period  
 10.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value=""/> <b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value=""/>

# 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 372 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Sheroo M Rusby

Mailing Address 4900 27th St N

City State Zip Code  
Arlington VA 22207-2762

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.26058

Amount of Each Receipt this Period  
10.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Sheroo M Rusby

Mailing Address 4900 27th St N

City State Zip Code  
Arlington VA 22207-2762

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.26059

Amount of Each Receipt this Period  
10.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Marjorie L Russell

Mailing Address 154 W Tulpehocken St

City State Zip Code  
Philadelphia PA 19144-2620

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.27583

Amount of Each Receipt this Period  
800.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<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 373 / 932
	<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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Paul Russell

Mailing Address 842 Elting Rd.

City State Zip Code  
**Rosendale NY 12472**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 29 2006**

**Transaction ID: SA11A1.26061**

Amount of Each Receipt this Period  
50.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Mary Lou Lou Ryder

Mailing Address 630 NW 120th Trl

City State Zip Code  
**Branford FL 32008-7015**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 15 2006**

**Transaction ID: SA11A1.26063**

Amount of Each Receipt this Period  
50.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Priscilla Salant

Mailing Address 812 E 7th St

City State Zip Code  
**Moscow ID 83843-3532**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 15 2006**

**Transaction ID: SA11A1.26065**

Amount of Each Receipt this Period  
50.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>0.00</b>
<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 374 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Alan Saleski

Mailing Address 2116 Harrison St

City State Zip Code  
Evanston IL 60201-2223

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

**Transaction ID:** SA11A1.26066

Amount of Each Receipt this Period  
.....100.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

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

Mailing Address 703 Riverview Ave

City State Zip Code  
Teaneck NJ 07666-2268

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

**Transaction ID:** SA11A1.26078

Amount of Each Receipt this Period  
.....100.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Marie Salwen

Mailing Address 703 Riverview Ave

City State Zip Code  
Teaneck NJ 07666-2268

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2006

**Transaction ID:** SA11A1.26068

Amount of Each Receipt this Period  
.....25.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► .....0.00

**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 375 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Marie Salwen

Mailing Address 703 Riverview Ave

City State Zip Code  
Teaneck NJ 07666-2268

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	7		2	0	0	6

Transaction ID: SA11A1.26069

Amount of Each Receipt this Period  
50.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

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

Mailing Address 703 Riverview Ave

City State Zip Code  
Teaneck NJ 07666-2268

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	7		2	0	0	6

Transaction ID: SA11A1.26070

Amount of Each Receipt this Period  
75.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Marie Salwen

Mailing Address 703 Riverview Ave

City State Zip Code  
Teaneck NJ 07666-2268

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	7		2	0	0	6

Transaction ID: SA11A1.26071

Amount of Each Receipt this Period  
75.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 376 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Marie Salwen

Mailing Address 703 Riverview Ave

City State Zip Code  
Teaneck NJ 07666-2268

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 27 / 2006

Transaction ID: SA11A1.26072

Amount of Each Receipt this Period  
75.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

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

Mailing Address 703 Riverview Ave

City State Zip Code  
Teaneck NJ 07666-2268

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 27 / 2006

Transaction ID: SA11A1.26073

Amount of Each Receipt this Period  
100.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Marie Salwen

Mailing Address 703 Riverview Ave

City State Zip Code  
Teaneck NJ 07666-2268

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 27 / 2006

Transaction ID: SA11A1.26074

Amount of Each Receipt this Period  
100.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 377 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Marie Salwen

Mailing Address 703 Riverview Ave

City State Zip Code  
Teaneck NJ 07666-2268

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.26075

Amount of Each Receipt this Period  
.....100.00

Earmark to Debbie Stabenow (MI-00S)

**[MEMO ITEM]**

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

Mailing Address 703 Riverview Ave

City State Zip Code  
Teaneck NJ 07666-2268

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.26076

Amount of Each Receipt this Period  
.....100.00

Earmark to Kent Conrad (N-D-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Marie Salwen

Mailing Address 703 Riverview Ave

City State Zip Code  
Teaneck NJ 07666-2268

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.26077

Amount of Each Receipt this Period  
.....75.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 378 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Leo Sartori

Mailing Address 144 Porter St

City State Zip Code  
Granby MA 01033-3323

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.26079

Amount of Each Receipt this Period  
50.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Ralph I Sato

Mailing Address 176 Kaai St

City State Zip Code  
Honolulu HI 96821-1546

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.26081

Amount of Each Receipt this Period  
25.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Ralph I Sato

Mailing Address 176 Kaai St

City State Zip Code  
Honolulu HI 96821-1546

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.26082

Amount of Each Receipt this Period  
25.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 379 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Julie Schecter		Date of Receipt M M / D D / Y Y Y Y Y 09 / 27 / 2006
Mailing Address PO Box 424		Transaction ID: SA11A1.26084
City Stow	State MA	Zip Code 01775-0424
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Self-employed	Occupation Writer	Earmark to Sherrod Brown (OH-00S)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Julie Schecter		Date of Receipt M M / D D / Y Y Y Y Y 09 / 27 / 2006
Mailing Address PO Box 424		Transaction ID: SA11A1.26085
City Stow	State MA	Zip Code 01775-0424
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-employed	Occupation Writer	Earmark to John Tester (M-T-00S)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Julie Schecter		Date of Receipt M M / D D / Y Y Y Y Y 09 / 27 / 2006
Mailing Address PO Box 424		Transaction ID: SA11A1.26429
City Stow	State MA	Zip Code 01775-0424
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer Self-employed	Occupation Writer	Earmark to Patricia Matrid (NM-01H)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	[MEMO ITEM]

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 380 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. Julie Schecter</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6	
Mailing Address PO Box 424		Transaction ID: SA11A1.26430	
City <b>Stow</b>	State <b>MA</b>	Zip Code <b>01775-0424</b>	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Coleen Rowley (MN-02H)	
Name of Employer Self-employed	Occupation Writer	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B. Walter Scheider</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6	
Mailing Address 1016 Woodbridge Blvd		Transaction ID: SA11A1.26087	
City <b>Ann Arbor</b>	State <b>MI</b>	Zip Code <b>48103-4750</b>	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Sherrod Brown (OH-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C. Walter Scheider</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6	
Mailing Address 1016 Woodbridge Blvd		Transaction ID: SA11A1.26088	
City <b>Ann Arbor</b>	State <b>MI</b>	Zip Code <b>48103-4750</b>	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Ned Lamont (CT-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 381 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Walter Scheider		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 1016 Woodbridge Blvd		Transaction ID: SA11A1.26089	
City State Zip Code Ann Arbor MI 48103-4750	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bob Casey (PA-00S)	
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00		
		<b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>B.</b> Walter Scheider		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 1016 Woodbridge Blvd		Transaction ID: SA11A1.26090	
City State Zip Code Ann Arbor MI 48103-4750	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Jerry McNerny (CA-11H)	
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00		
		<b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>C.</b> Walter Scheider		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 1016 Woodbridge Blvd		Transaction ID: SA11A1.26091	
City State Zip Code Ann Arbor MI 48103-4750	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bernie Sanders (VT-00S)	
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00		
		<b>[MEMO ITEM]</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 382 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Walter Scheider

Mailing Address 1016 Woodbridge Blvd

City State Zip Code  
**Ann Arbor MI 48103-4750**

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 2 7 / 2 0 0 6

**Transaction ID: SA11A1.26092**

Amount of Each Receipt this Period  
.....200.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

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

Mailing Address 1016 Woodbridge Blvd

City State Zip Code  
**Ann Arbor MI 48103-4750**

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 2 7 / 2 0 0 6

**Transaction ID: SA11A1.26093**

Amount of Each Receipt this Period  
.....50.00

Earmark to John Cranley (OH-01H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Walter Scheider

Mailing Address 1016 Woodbridge Blvd

City State Zip Code  
**Ann Arbor MI 48103-4750**

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 2 7 / 2 0 0 6

**Transaction ID: SA11A1.26094**

Amount of Each Receipt this Period  
.....100.00

Earmark to Lois Murphy (P-A-06H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► .....0.00

**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 383 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Walter Scheider

Mailing Address 1016 Woodbridge Blvd

City State Zip Code  
Ann Arbor MI 48103-4750

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.26095

Amount of Each Receipt this Period  
50.00

Earmark to Patricia Matrid (NM-01H)

**[MEMO ITEM]**

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

Mailing Address 1016 Woodbridge Blvd

City State Zip Code  
Ann Arbor MI 48103-4750

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.26096

Amount of Each Receipt this Period  
50.00

Earmark to Eric Massa (NY-09H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Walter Scheider

Mailing Address 1016 Woodbridge Blvd

City State Zip Code  
Ann Arbor MI 48103-4750

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.26097

Amount of Each Receipt this Period  
100.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 384 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Walter Scheider

Mailing Address 1016 Woodbridge Blvd

City State Zip Code  
Ann Arbor MI 48103-4750

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.26098

Amount of Each Receipt this Period  
.....50.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

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

Mailing Address 1016 Woodbridge Blvd

City State Zip Code  
Ann Arbor MI 48103-4750

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.26099

Amount of Each Receipt this Period  
.....100.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Walter Scheider

Mailing Address 1016 Woodbridge Blvd

City State Zip Code  
Ann Arbor MI 48103-4750

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.26100

Amount of Each Receipt this Period  
.....50.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 385 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Walter Scheider

Mailing Address 1016 Woodbridge Blvd

City State Zip Code  
Ann Arbor MI 48103-4750

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.26101

Amount of Each Receipt this Period  
.....50.00

Earmark to Patty Wetterling (MN-06H)

**[MEMO ITEM]**

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

Mailing Address 3207 Pickwick Ln

City State Zip Code  
Chevy Chase MD 20815-4041

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.26104

Amount of Each Receipt this Period  
.....50.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Elliott Schiffmann

Mailing Address 3207 Pickwick Ln

City State Zip Code  
Chevy Chase MD 20815-4041

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.26105

Amount of Each Receipt this Period  
.....50.00

Earmark to Zack Space (OH-19H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	.....0.00
<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 386 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Elliott Schiffmann

Mailing Address 3207 Pickwick Ln

City State Zip Code  
Chevy Chase MD 20815-4041

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
09 / 15 / 2006

Transaction ID: SA11A1.26106

Amount of Each Receipt this Period  
50.00

Earmark to Patricia Matrid (NM-01H)

**[MEMO ITEM]**

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

Mailing Address 3207 Pickwick Ln

City State Zip Code  
Chevy Chase MD 20815-4041

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
09 / 15 / 2006

Transaction ID: SA11A1.26107

Amount of Each Receipt this Period  
50.00

Earmark to Lois Murphy (P-A-06H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Elliott Schiffmann

Mailing Address 3207 Pickwick Ln

City State Zip Code  
Chevy Chase MD 20815-4041

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
09 / 15 / 2006

Transaction ID: SA11A1.26108

Amount of Each Receipt this Period  
100.00

Earmark to Coleen Rowley (MN-02H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... 0.00

**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 387 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Elliott Schiffmann

Mailing Address 3207 Pickwick Ln

City State Zip Code  
Chevy Chase MD 20815-4041

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 29 / 2006

Transaction ID: SA11A1.26103

Amount of Each Receipt this Period  
50.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

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

Mailing Address 14038 Sunset Dr

City State Zip Code  
Whittier CA 90602-2656

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26110

Amount of Each Receipt this Period  
50.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Hartland Schmidt

Mailing Address 209 Nisbet Way

City State Zip Code  
Riverside CA 92507-4610

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.26111

Amount of Each Receipt this Period  
50.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 388 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. Fred Schoen</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address 919 Westchester Pl		Transaction ID: SA11A1.26112	
City State Zip Code Los Angeles CA 90019-2005	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C	Earmark to Diane Farrell (CT-04H)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B. Eugene H Schreiber</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 0 5 / 2 0 0 6	
Mailing Address 1 Slade Ave Apt 202		Transaction ID: SA11A1.26113	
City State Zip Code Pikesville MD 21208-5216	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Earmark to John Tester (M-T-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C. Eugene H Schreiber</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 0 5 / 2 0 0 6	
Mailing Address 1 Slade Ave Apt 202		Transaction ID: SA11A1.26114	
City State Zip Code Pikesville MD 21208-5216	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Earmark to Bob Menendez (NJ-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 389 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

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

Mailing Address 105 Manor Dr

City State Zip Code  
Columbia MO 65203-1727

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.26115

Amount of Each Receipt this Period  
10.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
John C Schuder

Mailing Address 105 Manor Dr

City State Zip Code  
Columbia MO 65203-1727

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.26116

Amount of Each Receipt this Period  
10.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
John C Schuder

Mailing Address 105 Manor Dr

City State Zip Code  
Columbia MO 65203-1727

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.26117

Amount of Each Receipt this Period  
10.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 390 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

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

Mailing Address 105 Manor Dr

City State Zip Code  
Columbia MO 65203-1727

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26118

Amount of Each Receipt this Period  
10.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
James H Schulz

Mailing Address 557 State St

City State Zip Code  
Portsmouth NH 03801-4326

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 17 / 2006

Transaction ID: SA11A1.26119

Amount of Each Receipt this Period  
30.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Nora D Schumacher

Mailing Address 480 Mitchford Rd

City State Zip Code  
Wayne PA 19087-2220

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26120

Amount of Each Receipt this Period  
100.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 391 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> David P Segel		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address 5821 Wayne Rd		Transaction ID: SA11A1.26122	
City Pittsburgh	State PA	Amount of Each Receipt this Period 50.00	
Zip Code 15206-2109		Earmark to Sherrod Brown (OH-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> David P Segel		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address 5821 Wayne Rd		Transaction ID: SA11A1.26123	
City Pittsburgh	State PA	Amount of Each Receipt this Period 50.00	
Zip Code 15206-2109		Earmark to Ned Lamont (CT-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> David P Segel		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address 5821 Wayne Rd		Transaction ID: SA11A1.26124	
City Pittsburgh	State PA	Amount of Each Receipt this Period 50.00	
Zip Code 15206-2109		Earmark to John Tester (M-T-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 392 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Rees R Shearer

Mailing Address PO Box 117

City State Zip Code  
**Emory VA 24327-0117**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
**09 27 2006**

**Transaction ID: SA11A1.26125**

Amount of Each Receipt this Period  
200.00

Earmark to Michael Arcuri (NY-24H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Rees R Shearer

Mailing Address PO Box 117

City State Zip Code  
**Emory VA 24327-0117**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
**09 27 2006**

**Transaction ID: SA11A1.26126**

Amount of Each Receipt this Period  
200.00

Earmark to Patrick Muprhy (PA-08H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Rees R Shearer

Mailing Address PO Box 117

City State Zip Code  
**Emory VA 24327-0117**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
**09 27 2006**

**Transaction ID: SA11A1.26127**

Amount of Each Receipt this Period  
200.00

Earmark to Phil Hare (IL-17H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 393 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. C A Shields</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 403 W 7th St Unit 305		Transaction ID: SA11A1.26128	
City State Zip Code Long Beach CA 90813-4192	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bernie Sanders (VT-00S)	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. A. Louis Shor</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 18 Pecan Ct		Transaction ID: SA11A1.26129	
City State Zip Code Mount Laurel NJ 08054-6925	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Ned Lamont (CT-00S)	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. A. Louis Shor</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 18 Pecan Ct		Transaction ID: SA11A1.26130	
City State Zip Code Mount Laurel NJ 08054-6925	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bob Menendez (NJ-00S)	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00		

[MEMO ITEM]

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 394 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Ruth Sidel

Mailing Address 325 E 72nd St Apt 10A

City State Zip Code  
New York NY 10021-4685

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26131

Amount of Each Receipt this Period  
50.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

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

Mailing Address 325 E 72nd St Apt 10A

City State Zip Code  
New York NY 10021-4685

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26132

Amount of Each Receipt this Period  
50.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

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

Mailing Address 1875 Willow St

City State Zip Code  
San Diego CA 92106-1821

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.26133

Amount of Each Receipt this Period  
50.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 395 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Jack M Siegel

Mailing Address 1875 Willow St

City State Zip Code  
San Diego CA 92106-1821

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.26134

Amount of Each Receipt this Period  
50.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Jack M Siegel

Mailing Address 1875 Willow St

City State Zip Code  
San Diego CA 92106-1821

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.26135

Amount of Each Receipt this Period  
50.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

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

Mailing Address 1875 Willow St

City State Zip Code  
San Diego CA 92106-1821

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.26136

Amount of Each Receipt this Period  
50.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

**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 396 / 932  
(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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
A Joanne Siegla

Mailing Address 2486 Chestnut Rd

City State Zip Code  
Seven Hills OH 44131-3513

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 05 / 2006

Transaction ID: SA11A1.26140

Amount of Each Receipt this Period  
25.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
A Joanne Siegla

Mailing Address 2486 Chestnut Rd

City State Zip Code  
Seven Hills OH 44131-3513

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2006

Transaction ID: SA11A1.26138

Amount of Each Receipt this Period  
25.00

Earmark to Zack Space (OH-19H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
A Joanne Siegla

Mailing Address 2486 Chestnut Rd

City State Zip Code  
Seven Hills OH 44131-3513

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 29 / 2006

Transaction ID: SA11A1.26139

Amount of Each Receipt this Period  
20.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 397 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Peter Sills

Mailing Address 1010 Ennis Hill Road

City State Zip Code  
Marchfield VT 05658

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 29 / 2006

Transaction ID: SA11A1.26431

Amount of Each Receipt this Period  
50.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Michael F Silver

Mailing Address 7501 Myrtle Vista Ave

City State Zip Code  
Sacramento CA 95831-4007

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 20 / 2006

Transaction ID: SA11A1.26141

Amount of Each Receipt this Period  
50.00

Earmark to Patricia Matrid (NM-01H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Michael F Silver

Mailing Address 7501 Myrtle Vista Ave

City State Zip Code  
Sacramento CA 95831-4007

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 20 / 2006

Transaction ID: SA11A1.26142

Amount of Each Receipt this Period  
50.00

Earmark to Lois Murphy (P-A-06H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 398 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Michael F Silver

Mailing Address 7501 Myrtle Vista Ave

City State Zip Code  
Sacramento CA 95831-4007

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	0	/	2	0	0	6

Transaction ID: SA11A1.26143

Amount of Each Receipt this Period  
50.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Michael F Silver

Mailing Address 7501 Myrtle Vista Ave

City State Zip Code  
Sacramento CA 95831-4007

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	0	/	2	0	0	6

Transaction ID: SA11A1.26144

Amount of Each Receipt this Period  
50.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Esther J Sinclair

Mailing Address 43 Tamalpais Ave

City State Zip Code  
San Anselmo CA 94960-2121

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.26146

Amount of Each Receipt this Period  
100.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 399 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. Patricia Sitkin</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 28631 E Shelton Rd		Transaction ID: SA11A1.26147	
City Linden	State CA	Zip Code 95236-9420	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Ned Lamont (CT-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B. Edgar L Smith</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address PO Box 989		Transaction ID: SA11A1.26149	
City Morro Bay	State CA	Zip Code 93443-0989	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Dan Maffei (NY-25H)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C. Edgar L Smith</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address PO Box 989		Transaction ID: SA11A1.26150	
City Morro Bay	State CA	Zip Code 93443-0989	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Joseph A. Sestak (PA-07H)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 400 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Edgar L Smith

Mailing Address PO Box 989

City State Zip Code  
Morro Bay CA 93443-0989

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.26151

Amount of Each Receipt this Period  
.....20.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Edgar L Smith

Mailing Address PO Box 989

City State Zip Code  
Morro Bay CA 93443-0989

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.26152

Amount of Each Receipt this Period  
.....20.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
John C Smith

Mailing Address 2038 Eastlake Ave East Apt E

City State Zip Code  
Seattle WA 98102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	9	/	2	0	0	6

Transaction ID: SA11A1.26154

Amount of Each Receipt this Period  
.....25.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 401 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Kathryn K Smith

Mailing Address 290 Kingstown Way Unit 339

City State Zip Code  
Duxbury MA 02332-4637

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26155

Amount of Each Receipt this Period  
25.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Kathryn K Smith

Mailing Address 290 Kingstown Way Unit 339

City State Zip Code  
Duxbury MA 02332-4637

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26156

Amount of Each Receipt this Period  
25.00

Earmark to Eric Massa (NY-09H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Kathryn K Smith

Mailing Address 290 Kingstown Way Unit 339

City State Zip Code  
Duxbury MA 02332-4637

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26157

Amount of Each Receipt this Period  
25.00

Earmark to Lois Murphy (P-A-06H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

**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 402 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Kathryn K Smith

Mailing Address 290 Kingstown Way Unit 339

City State Zip Code  
Duxbury MA 02332-4637

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.26158

Amount of Each Receipt this Period  
25.00

Earmark to Julia Carson (IN-07H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Kathryn K Smith

Mailing Address 290 Kingstown Way Unit 339

City State Zip Code  
Duxbury MA 02332-4637

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.26159

Amount of Each Receipt this Period  
25.00

Earmark to Jerry McNerny (CA-11H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Kathryn K Smith

Mailing Address 290 Kingstown Way Unit 339

City State Zip Code  
Duxbury MA 02332-4637

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.26160

Amount of Each Receipt this Period  
25.00

Earmark to John Cranley (OH-01H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

**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 403 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
M B B Smith

Mailing Address 316 Escalona Dr

City State Zip Code  
Santa Cruz CA 95060-2607

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.27594

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
George Sodowick

Mailing Address 28 Mountain Ridge Dr

City State Zip Code  
Livingston NJ 07039-3407

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26162

Amount of Each Receipt this Period  
100.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Judy W Soffler

Mailing Address 8 Termakay Dr

City State Zip Code  
New City NY 10956-6434

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26163

Amount of Each Receipt this Period  
20.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	250.00
<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 404 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Judy W Soffler		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 8 Termakay Dr		Transaction ID: SA11A1.26164	
City State Zip Code New City NY 10956-6434	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bruce Braley (IA-01H)	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Aggregate Year-to-Date .00	<b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>B.</b> Pearl F Staller		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 19 Count Rumford Ln		Transaction ID: SA11A1.27590	
City State Zip Code Lloyd Harbor NY 11743-9770	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Sherron Brown (OH-00S)	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Homemaker Aggregate Year-to-Date 250.00	<b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>C.</b> Elizabeth W Stavely		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 10961 Gurley Ln		Transaction ID: SA11A1.26166	
City State Zip Code Mendocino CA 95460-9585	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Sherron Brown (OH-00S)	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Aggregate Year-to-Date .00	<b>[MEMO ITEM]</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	250.00
<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 405 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Elizabeth W Stavely

Mailing Address 10961 Gurley Ln

City State Zip Code  
Mendocino CA 95460-9585

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26167

Amount of Each Receipt this Period  
25.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Charles S Stephen

Mailing Address 7130 South St

City State Zip Code  
Lincoln NE 68506-6552

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26169

Amount of Each Receipt this Period  
15.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Bonnie W Stephens

Mailing Address 63 Cedar St

City State Zip Code  
Stony Brook NY 11790-1733

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26171

Amount of Each Receipt this Period  
100.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>0.00</b>
<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 406 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Bonnie W Stephens

Mailing Address 63 Cedar St

City State Zip Code  
Stony Brook NY 11790-1733

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 27 / 2006

Transaction ID: SA11A1.26172

Amount of Each Receipt this Period  
100.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Bonnie W Stephens

Mailing Address 63 Cedar St

City State Zip Code  
Stony Brook NY 11790-1733

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 27 / 2006

Transaction ID: SA11A1.26173

Amount of Each Receipt this Period  
100.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Bonnie W Stephens

Mailing Address 63 Cedar St

City State Zip Code  
Stony Brook NY 11790-1733

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 27 / 2006

Transaction ID: SA11A1.26174

Amount of Each Receipt this Period  
100.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 407 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Bonnie W Stephens

Mailing Address 63 Cedar St

City State Zip Code  
Stony Brook NY 11790-1733

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26175

Amount of Each Receipt this Period  
100.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Peter W Stephens

Mailing Address 63 Cedar St

City State Zip Code  
Stony Brook NY 11790-1733

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26176

Amount of Each Receipt this Period  
100.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Peter W Stephens

Mailing Address 63 Cedar St

City State Zip Code  
Stony Brook NY 11790-1733

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26177

Amount of Each Receipt this Period  
100.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 408 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. Peter W Stephens</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 63 Cedar St		Transaction ID: SA11A1.26178	
City State Zip Code Stony Brook NY 11790-1733	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Diane Farrell (CT-04H)	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>B. Peter W Stephens</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 63 Cedar St		Transaction ID: SA11A1.26179	
City State Zip Code Stony Brook NY 11790-1733	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Joseph A. Sestak (PA-07H)	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>C. Peter W Stephens</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 63 Cedar St		Transaction ID: SA11A1.26180	
City State Zip Code Stony Brook NY 11790-1733	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Dan Maffei (NY-25H)	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 409 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Peter W Stephens

Mailing Address 63 Cedar St

City State Zip Code  
Stony Brook NY 11790-1733

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
09 / 27 / 2006

**Transaction ID:** SA11A1.26181

Amount of Each Receipt this Period  
100.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Evelyn Stern

Mailing Address 12367 Deerbrook Ln

City State Zip Code  
Los Angeles CA 90049-1909

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
09 / 29 / 2006

**Transaction ID:** SA11A1.26182

Amount of Each Receipt this Period  
25.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Mark S Sternman

Mailing Address 426 Hanover St Apt 5

City State Zip Code  
Boston MA 02113-1419

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
09 / 15 / 2006

**Transaction ID:** SA11A1.26183

Amount of Each Receipt this Period  
50.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

**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 410 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Kenneth A Stevens

Mailing Address 8564 Storch Woods Dr Apt 1B

City State Zip Code  
Savage MD 20763-9760

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 15 / 2006

Transaction ID: SA11A1.26184

Amount of Each Receipt this Period  
30.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Kenneth A Stevens

Mailing Address 8564 Storch Woods Dr Apt 1B

City State Zip Code  
Savage MD 20763-9760

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 15 / 2006

Transaction ID: SA11A1.26185

Amount of Each Receipt this Period  
30.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Elizabeth J Stickney

Mailing Address 771 State Route 271

City State Zip Code  
Ligonier PA 15658-2565

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 25 / 2006

Transaction ID: SA11A1.26187

Amount of Each Receipt this Period  
20.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

**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 411 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Marion K Stocking

Mailing Address 24 Berry Cove Rd

City State Zip Code  
**Lamoine ME 04605-4617**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 15 2006**

**Transaction ID: SA11A1.26188**

Amount of Each Receipt this Period  
.....35.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Marion K Stocking

Mailing Address 24 Berry Cove Rd

City State Zip Code  
**Lamoine ME 04605-4617**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 15 2006**

**Transaction ID: SA11A1.26189**

Amount of Each Receipt this Period  
.....35.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Pablo Stone

Mailing Address PO Box 145

City State Zip Code  
**Black Mtn NC 28711-0145**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 15 2006**

**Transaction ID: SA11A1.26190**

Amount of Each Receipt this Period  
.....10.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 412 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Pablo Stone

Mailing Address PO Box 145

City State Zip Code  
Black Mtn NC 28711-0145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.26191

Amount of Each Receipt this Period  
10.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Pablo Stone

Mailing Address PO Box 145

City State Zip Code  
Black Mtn NC 28711-0145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.26192

Amount of Each Receipt this Period  
10.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
John R Struble

Mailing Address 1111 N 5th St Apt 6

City State Zip Code  
Burlington IA 52601-4810

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.26194

Amount of Each Receipt this Period  
3.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

**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 413 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
John R Struble

Mailing Address 1111 N 5th St Apt 6

City Burlington State IA Zip Code 52601-4810

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 25 / 2006

Transaction ID: SA11A1.26193

Amount of Each Receipt this Period  
 2.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Ramona Gale Sublett

Mailing Address 2105 E Rio Verde Dr # E

City West Covina State CA Zip Code 91791-2756

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.26195

Amount of Each Receipt this Period  
 20.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Ramona Gale Sublett

Mailing Address 2105 E Rio Verde Dr # E

City West Covina State CA Zip Code 91791-2756

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.26196

Amount of Each Receipt this Period  
 20.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

**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 414 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Ramona Gale Sublett

Mailing Address 2105 E Rio Verde Dr # E

City State Zip Code  
West Covina CA 91791-2756

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.26197

Amount of Each Receipt this Period  
20.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Ramona Gale Sublett

Mailing Address 2105 E Rio Verde Dr # E

City State Zip Code  
West Covina CA 91791-2756

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.26198

Amount of Each Receipt this Period  
20.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Ramona Gale Sublett

Mailing Address 2105 E Rio Verde Dr # E

City State Zip Code  
West Covina CA 91791-2756

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.26199

Amount of Each Receipt this Period  
20.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

**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 415 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Ramona Gale Sublett

Mailing Address 2105 E Rio Verde Dr # E

City State Zip Code  
**West Covina CA 91791-2756**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
09 / 15 / 2006

**Transaction ID: SA11A1.26200**

Amount of Each Receipt this Period  
20.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Mary B Sullivan

Mailing Address 66 Indian Head Rd

City State Zip Code  
**Riverside CT 06878-2420**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
09 / 15 / 2006

**Transaction ID: SA11A1.26201**

Amount of Each Receipt this Period  
50.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Mary B Sullivan

Mailing Address 66 Indian Head Rd

City State Zip Code  
**Riverside CT 06878-2420**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
09 / 15 / 2006

**Transaction ID: SA11A1.26202**

Amount of Each Receipt this Period  
50.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... 0.00

**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 416 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Mary B Sullivan

Mailing Address 66 Indian Head Rd

City State Zip Code  
Riverside CT 06878-2420

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26203

Amount of Each Receipt this Period  
50.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Mary B Sullivan

Mailing Address 66 Indian Head Rd

City State Zip Code  
Riverside CT 06878-2420

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26204

Amount of Each Receipt this Period  
50.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Mary B Sullivan

Mailing Address 66 Indian Head Rd

City State Zip Code  
Riverside CT 06878-2420

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26205

Amount of Each Receipt this Period  
50.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 417 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Michael J Sullivan Mailing Address 1333 School Ln City Rydal State PA Zip Code 19046-1419 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.26206 Amount of Each Receipt this Period 3.00 Earmark to Sherrod Brown (OH-00S) <b>[MEMO ITEM]</b>
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	

<b>B.</b> Full Name (Last, First, Middle Initial) Michael J Sullivan Mailing Address 1333 School Ln City Rydal State PA Zip Code 19046-1419 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.26207 Amount of Each Receipt this Period 3.00 Earmark to Bob Menendez (NJ-00S) <b>[MEMO ITEM]</b>
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	

<b>C.</b> Full Name (Last, First, Middle Initial) Michael J Sullivan Mailing Address 1333 School Ln City Rydal State PA Zip Code 19046-1419 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.26208 Amount of Each Receipt this Period 1.00 Earmark to Robert C. Byrd (WV-00S) <b>[MEMO ITEM]</b>
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 418 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Michael J Sullivan Mailing Address 1333 School Ln City Rydal State PA Zip Code 19046-1419 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt <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>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.26209 Amount of Each Receipt this Period <table border="1"> <tr> <td>3.00</td> </tr> </table> Earmark to Bernie Sanders (VT-00S) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0	6	3.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	5		2	0	0	6														
3.00																							

<b>B.</b> Full Name (Last, First, Middle Initial) Michael J Sullivan Mailing Address 1333 School Ln City Rydal State PA Zip Code 19046-1419 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt <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>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.26210 Amount of Each Receipt this Period <table border="1"> <tr> <td>2.00</td> </tr> </table> Earmark to Daniel Akada (HI-00S) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0	6	2.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	5		2	0	0	6														
2.00																							

<b>C.</b> Full Name (Last, First, Middle Initial) Michael J Sullivan Mailing Address 1333 School Ln City Rydal State PA Zip Code 19046-1419 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt <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>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.26211 Amount of Each Receipt this Period <table border="1"> <tr> <td>2.00</td> </tr> </table> Earmark to Benjamin Cardin (MD-00S) <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0	6	2.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	5		2	0	0	6														
2.00																							

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>0.00</b>
<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 419 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Robert Sunde

Mailing Address 84 Summer Winds Drive, NE

City State Zip Code  
Rio Rancho NM 87124

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2006

Transaction ID: SA11A1.26213

Amount of Each Receipt this Period  
25.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Joel K Swadesh

Mailing Address 4104 Constance PI NE

City State Zip Code  
Albuquerque NM 87109-1908

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.26214

Amount of Each Receipt this Period  
75.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Joel K Swadesh

Mailing Address 4104 Constance PI NE

City State Zip Code  
Albuquerque NM 87109-1908

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.26215

Amount of Each Receipt this Period  
150.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 420 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Joel K Swadesh  
 Mailing Address 4104 Constance PI NE  
 City State Zip Code  
 Albuquerque NM 87109-1908  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 5 / 2 0 0 6  
**Transaction ID:** SA11A1.26216  
 Amount of Each Receipt this Period  
 150.00  
 Earmark to Bruce Braley (IA-01H)  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
June Swan  
 Mailing Address PO Box 181  
 City State Zip Code  
 Corte Madera CA 94976-0181  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 9 / 2 0 0 6  
**Transaction ID:** SA11A1.26217  
 Amount of Each Receipt this Period  
 30.00  
 Earmark to Bob Casey (PA-00S)  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
June Swan  
 Mailing Address PO Box 181  
 City State Zip Code  
 Corte Madera CA 94976-0181  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 9 / 2 0 0 6  
**Transaction ID:** SA11A1.26218  
 Amount of Each Receipt this Period  
 30.00  
 Earmark to Bob Casey (PA-00S)  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00  
**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 421 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Edward L Sweda

Mailing Address 172 Boston St

City State Zip Code  
Dorchester MA 02125-1142

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.26219

Amount of Each Receipt this Period  
30.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Edward L Sweda

Mailing Address 172 Boston St

City State Zip Code  
Dorchester MA 02125-1142

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.26220

Amount of Each Receipt this Period  
30.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Edward L Sweda

Mailing Address 172 Boston St

City State Zip Code  
Dorchester MA 02125-1142

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.26221

Amount of Each Receipt this Period  
30.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 422 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Edward L Sweda

Mailing Address 172 Boston St

City State Zip Code  
Dorchester MA 02125-1142

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 25 / 2006

**Transaction ID:** SA11A1.26222

Amount of Each Receipt this Period  
30.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Alice C Swift

Mailing Address 36 Pondview Dr

City State Zip Code  
Amherst MA 01002-3229

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 15 / 2006

**Transaction ID:** SA11A1.26224

Amount of Each Receipt this Period  
50.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Alice C Swift

Mailing Address 36 Pondview Dr

City State Zip Code  
Amherst MA 01002-3229

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 15 / 2006

**Transaction ID:** SA11A1.26225

Amount of Each Receipt this Period  
50.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... 0.00

**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 423 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Alice C Swift		Date of Receipt MM / DD / YYYY 09 / 15 / 2006
Mailing Address 36 Pondview Dr		Transaction ID: SA11A1.26226
City Amherst	State MA	Zip Code 01002-3229
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer	Occupation	Earmark to Sherrod Brown (OH-00S)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>B.</b> Henry Switkay		Date of Receipt MM / DD / YYYY 09 / 15 / 2006
Mailing Address 715 S Overlook Dr		Transaction ID: SA11A1.26227
City Alexandria	State VA	Zip Code 22305-1215
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 27.00	
Name of Employer	Occupation	Earmark to Diane Farrell (CT-04H)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>C.</b> Betsy Taylor		Date of Receipt MM / DD / YYYY 09 / 27 / 2006
Mailing Address 8214 Cedar St		Transaction ID: SA11A1.26229
City Silver Spring	State MD	Zip Code 20910-5558
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer	Occupation	Earmark to Robert C. Byrd (WV-00S)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 424 / 932

(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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Betsy Taylor		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 8214 Cedar St		Transaction ID: SA11A1.26230	
City State Zip Code Silver Spring MD 20910-5558	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Earmark to Bob Menendez (NJ-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Betsy Taylor		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 8214 Cedar St		Transaction ID: SA11A1.26231	
City State Zip Code Silver Spring MD 20910-5558	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Earmark to Betty Sutton (OH-13H)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Betsy Taylor		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address 8214 Cedar St		Transaction ID: SA11A1.26232	
City State Zip Code Silver Spring MD 20910-5558	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Earmark to Ned Lamont (CT-00S)		
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

0.00

**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 425 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Betsy Taylor

Mailing Address 8214 Cedar St

City State Zip Code  
Silver Spring MD 20910-5558

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.26233

Amount of Each Receipt this Period  
.....50.00

Earmark to Lois Murphy (P-A-06H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Betsy Taylor

Mailing Address 8214 Cedar St

City State Zip Code  
Silver Spring MD 20910-5558

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.26234

Amount of Each Receipt this Period  
.....50.00

Earmark to Zack Space (OH-19H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Betsy Taylor

Mailing Address 8214 Cedar St

City State Zip Code  
Silver Spring MD 20910-5558

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	0	6

Transaction ID: SA11A1.26235

Amount of Each Receipt this Period  
.....50.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 426 / 932  
(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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Betsy Taylor

Mailing Address 8214 Cedar St

City State Zip Code  
Silver Spring MD 20910-5558

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26236

Amount of Each Receipt this Period  
50.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Betsy Taylor

Mailing Address 8214 Cedar St

City State Zip Code  
Silver Spring MD 20910-5558

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26237

Amount of Each Receipt this Period  
100.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Betsy Taylor

Mailing Address 8214 Cedar St

City State Zip Code  
Silver Spring MD 20910-5558

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26238

Amount of Each Receipt this Period  
50.00

Earmark to Francine Busby (CA-50H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 427 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Betsy Taylor

Mailing Address 8214 Cedar St

City State Zip Code  
Silver Spring MD 20910-5558

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26239

Amount of Each Receipt this Period  
50.00

Earmark to Julia Carson (IN-07H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Betsy Taylor

Mailing Address 8214 Cedar St

City State Zip Code  
Silver Spring MD 20910-5558

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26240

Amount of Each Receipt this Period  
100.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Betsy Taylor

Mailing Address 8214 Cedar St

City State Zip Code  
Silver Spring MD 20910-5558

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26241

Amount of Each Receipt this Period  
50.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>0.00</b>
<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 428 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Betsy Taylor

Mailing Address 8214 Cedar St

City State Zip Code  
Silver Spring MD 20910-5558

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26242

Amount of Each Receipt this Period  
50.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Betsy Taylor

Mailing Address 8214 Cedar St

City State Zip Code  
Silver Spring MD 20910-5558

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26243

Amount of Each Receipt this Period  
100.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Betsy Taylor

Mailing Address 8214 Cedar St

City State Zip Code  
Silver Spring MD 20910-5558

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26244

Amount of Each Receipt this Period  
100.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 429 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Betsy Taylor

Mailing Address 8214 Cedar St

City State Zip Code  
Silver Spring MD 20910-5558

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26245

Amount of Each Receipt this Period  
100.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Simon Teolis

Mailing Address 5 South Stargazer

City State Zip Code  
Santa Fe NM 87506

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 29 / 2006

Transaction ID: SA11A1.26247

Amount of Each Receipt this Period  
25.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Arnold Thaw

Mailing Address 4840 N 31st Pl

City State Zip Code  
Phoenix AZ 85016-5022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26249

Amount of Each Receipt this Period  
20.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 430 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. Arnold Thaw</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 4840 N 31st PI		Transaction ID: SA11A1.26250	
City State Zip Code Phoenix AZ 85016-5022	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bernie Sanders (VT-00S)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B. Arnold Thaw</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 4840 N 31st PI		Transaction ID: SA11A1.26251	
City State Zip Code Phoenix AZ 85016-5022	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to John Tester (M-T-00S)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C. Arnold Thaw</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 4840 N 31st PI		Transaction ID: SA11A1.26252	
City State Zip Code Phoenix AZ 85016-5022	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Daniel Akada (HI-00S)	
Name of Employer Occupation	<b>[MEMO ITEM]</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

# 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 431 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Arnold Thaw		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006
Mailing Address 4840 N 31st PI		Transaction ID: SA11A1.26253
City State Zip Code Phoenix AZ 85016-5022	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Robert C. Byrd (WV-00S)  <b>[MEMO ITEM]</b>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) <b>B.</b> Arnold Thaw		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006
Mailing Address 4840 N 31st PI		Transaction ID: SA11A1.26254
City State Zip Code Phoenix AZ 85016-5022	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bob Menendez (NJ-00S)  <b>[MEMO ITEM]</b>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

Full Name (Last, First, Middle Initial) <b>C.</b> Arnold Thaw		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006
Mailing Address 4840 N 31st PI		Transaction ID: SA11A1.26255
City State Zip Code Phoenix AZ 85016-5022	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Ned Lamont (CT-00S)  <b>[MEMO ITEM]</b>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 432 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Arnold Thaw

Mailing Address 4840 N 31st PI

City State Zip Code  
Phoenix AZ 85016-5022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.26256

Amount of Each Receipt this Period  
20.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Dorothy Thorman

Mailing Address 760 W Mariposa St

City State Zip Code  
Altadena CA 91001-4557

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.27584

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Leonor A Tomero

Mailing Address 1725 New Hampshire Ave NW

City State Zip Code  
Washington DC 20009-2546

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 27 / 2006

Transaction ID: SA11A1.26258

Amount of Each Receipt this Period  
50.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **250.00**

**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 433 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Margaret Tommaso

Mailing Address 24110 Rushmore Ave

City State Zip Code  
Douglaston NY 11362-1042

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

**Transaction ID:** SA11A1.26260

Amount of Each Receipt this Period  
25.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Margaret Tommaso

Mailing Address 24110 Rushmore Ave

City State Zip Code  
Douglaston NY 11362-1042

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

**Transaction ID:** SA11A1.26261

Amount of Each Receipt this Period  
25.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Margaret Tommaso

Mailing Address 24110 Rushmore Ave

City State Zip Code  
Douglaston NY 11362-1042

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

**Transaction ID:** SA11A1.26262

Amount of Each Receipt this Period  
25.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 434 / 932  
(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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Edward K Toth

Mailing Address 405 Hampton Pl

City Pompton Plns State NJ Zip Code 07444-2136

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	6

Transaction ID: SA11A1.26263

Amount of Each Receipt this Period  
50.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Edward K Toth

Mailing Address 405 Hampton Pl

City Pompton Plns State NJ Zip Code 07444-2136

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	6

Transaction ID: SA11A1.26264

Amount of Each Receipt this Period  
50.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Edward K Toth

Mailing Address 405 Hampton Pl

City Pompton Plns State NJ Zip Code 07444-2136

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	6

Transaction ID: SA11A1.26265

Amount of Each Receipt this Period  
50.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	0.00
<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 435 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Edward K Toth

Mailing Address 405 Hampton Pl

City State Zip Code  
Pompton Plns NJ 07444-2136

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.26266

Amount of Each Receipt this Period  
50.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
George H Trilling

Mailing Address 770 Wildcat Canyon Rd

City State Zip Code  
Berkeley CA 94708-1555

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26267

Amount of Each Receipt this Period  
100.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Joel Trupin

Mailing Address 3704 Woodmont Blvd

City State Zip Code  
Nashville TN 37215-1840

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 14 / 2006

Transaction ID: SA11A1.26269

Amount of Each Receipt this Period  
100.00

Earmark to Peter Welch (V-T-01H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 436 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Richard A Tybout		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address 324 Pingree Dr		Transaction ID: SA11A1.26270	
City Worthington	State OH	Amount of Each Receipt this Period 50.00	
Zip Code 43085-3158		Earmark to Benjamin Cardin (MD-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Richard A Tybout		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address 324 Pingree Dr		Transaction ID: SA11A1.26271	
City Worthington	State OH	Amount of Each Receipt this Period 50.00	
Zip Code 43085-3158		Earmark to Bruce Braley (IA-01H)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Richard A Tybout		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address 324 Pingree Dr		Transaction ID: SA11A1.26272	
City Worthington	State OH	Amount of Each Receipt this Period 50.00	
Zip Code 43085-3158		Earmark to Daniel Akada (HI-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 437 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Richard A Tybout		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 324 Pingree Dr		Transaction ID: SA11A1.26273	
City Worthington	State OH	Zip Code 43085-3158	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Earmark to Robert C. Byrd (WV-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B.</b> Richard A Tybout		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 324 Pingree Dr		Transaction ID: SA11A1.26274	
City Worthington	State OH	Zip Code 43085-3158	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Earmark to Joseph A. Sestak (PA-07H)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C.</b> Richard A Tybout		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 324 Pingree Dr		Transaction ID: SA11A1.26275	
City Worthington	State OH	Zip Code 43085-3158	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Earmark to Diane Farrell (CT-04H)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 438 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Richard A Tybout

Mailing Address 324 Pingree Dr

City State Zip Code  
**Worthington OH 43085-3158**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y  
**09 25 2006**

**Transaction ID: SA11A1.26276**

Amount of Each Receipt this Period  
.....50.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Margot Vagliardo

Mailing Address 23 Frederick Dr.

City State Zip Code  
**Apalachin NY 13732**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y  
**09 29 2006**

**Transaction ID: SA11A1.26278**

Amount of Each Receipt this Period  
.....50.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Nancy P Valaas

Mailing Address 4439 94th Ave NE

City State Zip Code  
**Bellevue WA 98004-1315**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y  
**09 15 2006**

**Transaction ID: SA11A1.26279**

Amount of Each Receipt this Period  
.....50.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 439 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Nancy P Valaas

Mailing Address 4439 94th Ave NE

City State Zip Code  
Bellevue WA 98004-1315

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26280

Amount of Each Receipt this Period  
50.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Nancy P Valaas

Mailing Address 4439 94th Ave NE

City State Zip Code  
Bellevue WA 98004-1315

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26281

Amount of Each Receipt this Period  
50.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Ray F Valdez

Mailing Address 234 Moon Dr

City State Zip Code  
Boulder Creek CA 95006-9098

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26283

Amount of Each Receipt this Period  
50.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 440 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Ray F Valdez

Mailing Address 234 Moon Dr

City State Zip Code  
Boulder Creek CA 95006-9098

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
MM / DD / YYYY  
09 / 27 / 2006

Transaction ID: SA11A1.26284

Amount of Each Receipt this Period  
50.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Ray F Valdez

Mailing Address 234 Moon Dr

City State Zip Code  
Boulder Creek CA 95006-9098

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
MM / DD / YYYY  
09 / 27 / 2006

Transaction ID: SA11A1.26285

Amount of Each Receipt this Period  
50.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Ray F Valdez

Mailing Address 234 Moon Dr

City State Zip Code  
Boulder Creek CA 95006-9098

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
MM / DD / YYYY  
09 / 27 / 2006

Transaction ID: SA11A1.26286

Amount of Each Receipt this Period  
50.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 441 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Ray F Valdez

Mailing Address 234 Moon Dr

City State Zip Code  
Boulder Creek CA 95006-9098

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26287

Amount of Each Receipt this Period  
50.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Ray F Valdez

Mailing Address 234 Moon Dr

City State Zip Code  
Boulder Creek CA 95006-9098

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26288

Amount of Each Receipt this Period  
50.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Philip R Vandeman

Mailing Address 3533 Simmons Mill Ct SW

City State Zip Code  
Tumwater WA 98512-7808

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.26289

Amount of Each Receipt this Period  
100.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 442 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Stephen C Vandivere  
Mailing Address 13825 Baywood Ct  
City State Zip Code  
Centreville VA 20120-1747  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 9 / 2 0 0 6  
Transaction ID: SA11A1.26290  
Amount of Each Receipt this Period  
25.00  
Earmark to Bob Casey (PA-00S)  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Celestine Van Dorpe  
Mailing Address 2524 Thayer St  
City State Zip Code  
Evanston IL 60201-1320  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 7 / 2 0 0 6  
Transaction ID: SA11A1.27609  
Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
John H Vanschaick  
Mailing Address 1198 Stratford Rd  
City State Zip Code  
Schenectady NY 12308-2412  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 6  
Transaction ID: SA11A1.26292  
Amount of Each Receipt this Period  
100.00  
Earmark to Bob Menendez (NJ-00S)  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 250.00  
**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 443 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
John H Vanschaick

Mailing Address 1198 Stratford Rd

City State Zip Code  
Schenectady NY 12308-2412

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.26293

Amount of Each Receipt this Period  
50.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Edgar Villchur

Mailing Address PO Box 306

City State Zip Code  
Woodstock NY 12498-0306

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26294

Amount of Each Receipt this Period  
1500.00

Earmark to Lois Murphy (P-A-06H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Philippe Villers

Mailing Address 20 Whits End Rd

City State Zip Code  
Concord MA 01742-5411

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Families USA Foundation President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.26295

Amount of Each Receipt this Period  
250.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 444 / 932
	<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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

Full Name (Last, First, Middle Initial) <b>A. Frank von Hippel</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address <b>3 University Way</b>		<b>Transaction ID: SA11A1.26296</b>	
City <b>Princeton Jct</b>	State <b>NJ</b>	Zip Code <b>08550-1617</b>	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Joseph A. Sestak (PA-07H)	
Name of Employer <b>Princeton University</b>	Occupation <b>Professor</b>	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>B. Richard von Korff</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address <b>15 Rosemary Ct</b>		<b>Transaction ID: SA11A1.26297</b>	
City <b>Midland</b>	State <b>MI</b>	Zip Code <b>48640-3407</b>	Amount of Each Receipt this Period 15.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Joseph A. Sestak (PA-07H)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

Full Name (Last, First, Middle Initial) <b>C. Harold L. Votey</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address <b>1127 Harbor Hills Ln</b>		<b>Transaction ID: SA11A1.26299</b>	
City <b>Santa Barbara</b>	State <b>CA</b>	Zip Code <b>93109-1772</b>	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Ned Lamont (CT-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 445 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
William K Wachob

Mailing Address 79 Gresham Dr

City State Zip Code  
Egbertsville NY 14226-2947

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

**Transaction ID:** SA11A1.26301

Amount of Each Receipt this Period  
.....10.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
William K Wachob

Mailing Address 79 Gresham Dr

City State Zip Code  
Egbertsville NY 14226-2947

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

**Transaction ID:** SA11A1.26302

Amount of Each Receipt this Period  
.....10.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
William K Wachob

Mailing Address 79 Gresham Dr

City State Zip Code  
Egbertsville NY 14226-2947

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

**Transaction ID:** SA11A1.26303

Amount of Each Receipt this Period  
.....10.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	.....0.00
<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 446 / 932
	<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	

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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> William K Wachob		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 79 Gresham Dr		Transaction ID: SA11A1.26304	
City Eggertsville	State NY	Amount of Each Receipt this Period 10.00	
Zip Code 14226-2947		Earmark to Bob Menendez (NJ-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> William K Wachob		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 79 Gresham Dr		Transaction ID: SA11A1.26305	
City Eggertsville	State NY	Amount of Each Receipt this Period 10.00	
Zip Code 14226-2947		Earmark to Daniel Akada (HI-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> William K Wachob		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 79 Gresham Dr		Transaction ID: SA11A1.26306	
City Eggertsville	State NY	Amount of Each Receipt this Period 10.00	
Zip Code 14226-2947		Earmark to Bernie Sanders (VT-00S)	
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer	Occupation	Aggregate Year-to-Date ▼ .00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 447 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
William K Wachob

Mailing Address 79 Gresham Dr

City State Zip Code  
Egbertsville NY 14226-2947

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	6

Transaction ID: SA11A1.26307

Amount of Each Receipt this Period  
 10.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
William K Wachob

Mailing Address 79 Gresham Dr

City State Zip Code  
Egbertsville NY 14226-2947

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	6

Transaction ID: SA11A1.26308

Amount of Each Receipt this Period  
 10.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
James D Wagner

Mailing Address 4897 E Walnut St

City State Zip Code  
Westerville OH 43081-9610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	0	6

Transaction ID: SA11A1.26309

Amount of Each Receipt this Period  
 10.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value=""/> 0.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value=""/>

**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 448 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
James D Wagner

Mailing Address 4897 E Walnut St

City State Zip Code  
Westerville OH 43081-9610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.26310

Amount of Each Receipt this Period  
 10.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
James D Wagner

Mailing Address 4897 E Walnut St

City State Zip Code  
Westerville OH 43081-9610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.26311

Amount of Each Receipt this Period  
 10.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
James D Wagner

Mailing Address 4897 E Walnut St

City State Zip Code  
Westerville OH 43081-9610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.26312

Amount of Each Receipt this Period  
 10.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value=""/> <b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value=""/>



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 449 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
James D Wagner

Mailing Address 4897 E Walnut St

City State Zip Code  
**Westerville OH 43081-9610**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 / 15 / 2006**

**Transaction ID: SA11A1.26313**

Amount of Each Receipt this Period  
.....10.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
James D Wagner

Mailing Address 4897 E Walnut St

City State Zip Code  
**Westerville OH 43081-9610**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 / 15 / 2006**

**Transaction ID: SA11A1.26314**

Amount of Each Receipt this Period  
.....10.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Harold Walba

Mailing Address 3870 Carancho St

City State Zip Code  
**La Mesa CA 91941-7606**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 / 29 / 2006**

**Transaction ID: SA11A1.26315**

Amount of Each Receipt this Period  
.....25.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 450 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Edward Walbridge

Mailing Address 1440 N. Lakeshore Dr., #26E

City State Zip Code  
Chicago IL 60610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 29 / 2006

Transaction ID: SA11A1.26317

Amount of Each Receipt this Period  
200.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
George Wallerstein

Mailing Address 2604 NE 70th St

City State Zip Code  
Seattle WA 98115-5830

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2006

Transaction ID: SA11A1.27613

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Robert S Wallerstein

Mailing Address 290 Beach Rd

City State Zip Code  
Belvedere Tiburon CA 94920-2472

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26319

Amount of Each Receipt this Period  
25.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1000.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 451 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Robert S Wallerstein

Mailing Address 290 Beach Rd

City State Zip Code  
**Belvedere Tiburon CA 94920-2472**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y  
**09 / 15 / 2006**

**Transaction ID: SA11A1.26320**

Amount of Each Receipt this Period  
.....25.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Mary H Walsh

Mailing Address 230 Stanley Dr

City State Zip Code  
**Santa Barbara CA 93105-3721**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y  
**09 / 25 / 2006**

**Transaction ID: SA11A1.26321**

Amount of Each Receipt this Period  
.....25.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Mary H Walsh

Mailing Address 230 Stanley Dr

City State Zip Code  
**Santa Barbara CA 93105-3721**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y  
**09 / 25 / 2006**

**Transaction ID: SA11A1.26322**

Amount of Each Receipt this Period  
.....25.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	..... <b>0.00</b> .....
<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 452 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Mary H Walsh

Mailing Address 230 Stanley Dr

City State Zip Code  
Santa Barbara CA 93105-3721

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.26323

Amount of Each Receipt this Period  
25.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Mary H Walsh

Mailing Address 230 Stanley Dr

City State Zip Code  
Santa Barbara CA 93105-3721

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.26324

Amount of Each Receipt this Period  
25.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Roger N Walsh

Mailing Address University of Calif Med School

City State Zip Code  
Irvine CA 92697-0001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Univ of California Med. School Physician/Professor

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.26326

Amount of Each Receipt this Period  
250.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 453 / 932
<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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

<b>A.</b> Full Name (Last, First, Middle Initial) Roger N Walsh		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address University of Calif Med School		<b>Transaction ID:</b> SA11A1.26327	
City State Zip Code Irvine CA 92697-0001		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to John Cranley (OH-01H)	
Name of Employer Univ of California Med. School Occupation Physician/Professor		<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ .00	

<b>B.</b> Full Name (Last, First, Middle Initial) Roger N Walsh		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address University of Calif Med School		<b>Transaction ID:</b> SA11A1.26328	
City State Zip Code Irvine CA 92697-0001		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Patty Wetterling (MN-06H)	
Name of Employer Univ of California Med. School Occupation Physician/Professor		<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ .00	

<b>C.</b> Full Name (Last, First, Middle Initial) Roger N Walsh		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address University of Calif Med School		<b>Transaction ID:</b> SA11A1.26330	
City State Zip Code Irvine CA 92697-0001		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bob Casey (PA-00S)	
Name of Employer Univ of California Med. School Occupation Physician/Professor		<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

# 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 454 / 932
	<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	

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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Stephen Warnke Mailing Address 186 8th Ave City Brooklyn State NY Zip Code 11215-2225 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.26331 Amount of Each Receipt this Period 250.00 Earmark to Sherrod Brown (OH-00S) <b>[MEMO ITEM]</b>
Name of Employer Ropes & Gray Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date .00		

<b>B.</b> Full Name (Last, First, Middle Initial) Frank L Watson Mailing Address 15 Woodmere Ct City Paoli State PA Zip Code 19301-1248 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.26333 Amount of Each Receipt this Period 35.00 Earmark to Benjamin Cardin (MD-00S) <b>[MEMO ITEM]</b>
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date .00		

<b>C.</b> Full Name (Last, First, Middle Initial) Spencer R Weart Mailing Address 12 Buena Vista Dr City Hastings Hdsn State NY Zip Code 10706-1104 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.26334 Amount of Each Receipt this Period 250.00 Earmark to Benjamin Cardin (MD-00S) <b>[MEMO ITEM]</b>
Name of Employer American First Phisics Occupation Historian Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>0.00</b>
<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 455 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Spencer R Weart

Mailing Address 12 Buena Vista Dr

City State Zip Code  
Hastings Hdsn NY 10706-1104

FEC ID number of contributing federal political committee. **C**

Name of Employer American First Phisics Occupation Historian

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 29 / 2006

Transaction ID: SA11A1.26335

Amount of Each Receipt this Period  
100.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Diana K Weatherby

Mailing Address 6401 85th PI

City State Zip Code  
New Carrollton MD 20784-2719

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26336

Amount of Each Receipt this Period  
25.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Diana K Weatherby

Mailing Address 6401 85th PI

City State Zip Code  
New Carrollton MD 20784-2719

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26337

Amount of Each Receipt this Period  
25.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>0.00</b>
<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 456 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Diana K Weatherby

Mailing Address 6401 85th Pl

City State Zip Code  
New Carrollton MD 20784-2719

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.26338

Amount of Each Receipt this Period  
25.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Diana K Weatherby

Mailing Address 6401 85th Pl

City State Zip Code  
New Carrollton MD 20784-2719

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.26339

Amount of Each Receipt this Period  
25.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
John S Weaver

Mailing Address 13250 Wamplers Lake Rd

City State Zip Code  
Brooklyn MI 49230-9410

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.26340

Amount of Each Receipt this Period  
25.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 457 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Frances T Webb Mailing Address 19 Gray Gdns E City State Zip Code Cambridge MA 02138-1401 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.27581 Amount of Each Receipt this Period 400.00
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mary Brizius Weingart Mailing Address 5832 Lawton Ave City State Zip Code Oakland CA 94618-1511 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.26341 Amount of Each Receipt this Period 35.00 Earmark to Daniel Akada (HI-00S) <b>[MEMO ITEM]</b>
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mary Brizius Weingart Mailing Address 5832 Lawton Ave City State Zip Code Oakland CA 94618-1511 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.26342 Amount of Each Receipt this Period 35.00 Earmark to Ned Lamont (CT-00S) <b>[MEMO ITEM]</b>
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<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 458 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A.</b> Mary Brizius Weingart		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 5832 Lawton Ave		Transaction ID: SA11A1.26343	
City State Zip Code Oakland CA 94618-1511	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to John Tester (M-T-00S)	
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00		
		<b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>B.</b> Mary Brizius Weingart		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 5832 Lawton Ave		Transaction ID: SA11A1.26344	
City State Zip Code Oakland CA 94618-1511	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bernie Sanders (VT-00S)	
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00		
		<b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>C.</b> Mary Brizius Weingart		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 5832 Lawton Ave		Transaction ID: SA11A1.26345	
City State Zip Code Oakland CA 94618-1511	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Bob Casey (PA-00S)	
Name of Employer  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼ .00		
		<b>[MEMO ITEM]</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# 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 459 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Elizabeth B Weinstock Mailing Address 37 Kendal Dr City Oberlin State OH Zip Code 44074-1902 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.27585 Amount of Each Receipt this Period 250.00
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Joel Weisberg Mailing Address 105 Winona St City Northfield State MN Zip Code 55057-2232 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.26346 Amount of Each Receipt this Period 10.00 Earmark to Sherrod Brown (OH-00S) <b>[MEMO ITEM]</b>
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>C.</b> Full Name (Last, First, Middle Initial) Joel Weisberg Mailing Address 105 Winona St City Northfield State MN Zip Code 55057-2232 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.26347 Amount of Each Receipt this Period 10.00 Earmark to Daniel Akada (HI-00S) <b>[MEMO ITEM]</b>
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	250.00
<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 460 / 932  
(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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Joel Weisberg

Mailing Address 105 Winona St

City State Zip Code  
Northfield MN 55057-2232

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26348

Amount of Each Receipt this Period  
10.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Joel Weisberg

Mailing Address 105 Winona St

City State Zip Code  
Northfield MN 55057-2232

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26349

Amount of Each Receipt this Period  
10.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Joel Weisberg

Mailing Address 105 Winona St

City State Zip Code  
Northfield MN 55057-2232

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26350

Amount of Each Receipt this Period  
10.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 461 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Monna L. Wejrowski

Mailing Address 3440 Santa Maria St

City State Zip Code  
Detroit MI 48221-4001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
MM / DD / YYYY  
09 / 01 / 2006

Transaction ID: SA11A1.26352

Amount of Each Receipt this Period  
25.00

Earmark to Peter Welch (V-T-01H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Monna L. Wejrowski

Mailing Address 3440 Santa Maria St

City State Zip Code  
Detroit MI 48221-4001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
MM / DD / YYYY  
09 / 01 / 2006

Transaction ID: SA11A1.26353

Amount of Each Receipt this Period  
25.00

Earmark to Lois Murphy (P-A-06H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Monna L. Wejrowski

Mailing Address 3440 Santa Maria St

City State Zip Code  
Detroit MI 48221-4001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
MM / DD / YYYY  
09 / 01 / 2006

Transaction ID: SA11A1.26354

Amount of Each Receipt this Period  
25.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 462 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Monna L. Wejrowski

Mailing Address 3440 Santa Maria St

City State Zip Code  
Detroit MI 48221-4001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 01 / 2006

Transaction ID: SA11A1.26355

Amount of Each Receipt this Period  
25.00

Earmark to Patricia Matrid (NM-01H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
James M Wellman

Mailing Address 3621 Blaisdell Ave

City State Zip Code  
Minneapolis MN 55409-1212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26356

Amount of Each Receipt this Period  
100.00

Earmark to Bruce Braley (IA-01H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Gerald Wempner

Mailing Address 610 River Rd W

City State Zip Code  
Plains MT 59859-9354

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.26358

Amount of Each Receipt this Period  
20.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 463 / 932		
	<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

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Wilma E West

Mailing Address 1335 Rifle Range Rd

City State Zip Code  
El Cerrito CA 94530-2573

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26359

Amount of Each Receipt this Period  
50.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Lois D Whealey

Mailing Address 14 Oak St

City State Zip Code  
Athens OH 45701-2605

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26360

Amount of Each Receipt this Period  
35.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Sandra Whipple

Mailing Address 508 Waldron Terrace

City State Zip Code  
Merion Station PA 19066

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 29 / 2006

Transaction ID: SA11A1.26362

Amount of Each Receipt this Period  
100.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

**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 464 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Allyn B White

Mailing Address 72 Heineberg Rd

City State Zip Code  
**Burlington VT 05408-2555**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 15 2006**

**Transaction ID: SA11A1.26363**

Amount of Each Receipt this Period  
.....50.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Allyn B White

Mailing Address 72 Heineberg Rd

City State Zip Code  
**Burlington VT 05408-2555**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 15 2006**

**Transaction ID: SA11A1.26364**

Amount of Each Receipt this Period  
.....50.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Allyn B White

Mailing Address 72 Heineberg Rd

City State Zip Code  
**Burlington VT 05408-2555**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 15 2006**

**Transaction ID: SA11A1.26365**

Amount of Each Receipt this Period  
.....50.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 465 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Anne S White

Mailing Address PO Box 638, 203 Lorimer Lane

City Davidson State NC Zip Code 28036

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2006

**Transaction ID:** SA11A1.26367

Amount of Each Receipt this Period  
 50.00

Earmark to Zack Space (OH-19H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Ruth H Wilson

Mailing Address 415 Grand St Apt E1905

City New York State NY Zip Code 10002-4721

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2006

**Transaction ID:** SA11A1.26368

Amount of Each Receipt this Period  
 50.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Ruth H Wilson

Mailing Address 415 Grand St Apt E1905

City New York State NY Zip Code 10002-4721

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 27 / 2006

**Transaction ID:** SA11A1.26369

Amount of Each Receipt this Period  
 50.00

Earmark to Patty Wetterling (MN-06H)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 466 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Ronald S Winkler		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address PO Box 1739		<b>Transaction ID:</b> SA11A1.26370	
City Coeur D Alene	State ID	Zip Code 83816-1739	Amount of Each Receipt this Period 4.00
FEC ID number of contributing federal political committee. C		Earmark to Robert C. Byrd (WV-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>B.</b> Full Name (Last, First, Middle Initial) Barbara J Winne		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 1382 Newtown Langhorne Rd Apt D203		<b>Transaction ID:</b> SA11A1.26371	
City Newtown	State PA	Zip Code 18940-2401	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Earmark to Bob Casey (PA-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>C.</b> Full Name (Last, First, Middle Initial) Ernest Winsor		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 393 Hammond St		<b>Transaction ID:</b> SA11A1.26372	
City Chestnut Hill	State MA	Zip Code 02467-1225	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Earmark to Bob Menendez (NJ-00S)	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 467 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Ernest Winsor

Mailing Address 393 Hammond St

City State Zip Code  
Chestnut Hill MA 02467-1225

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.26373

Amount of Each Receipt this Period  
50.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Ernest Winsor

Mailing Address 393 Hammond St

City State Zip Code  
Chestnut Hill MA 02467-1225

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.26374

Amount of Each Receipt this Period  
25.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Lawrence S Wittner

Mailing Address 20 Irving St

City State Zip Code  
Albany NY 12202-1312

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26375

Amount of Each Receipt this Period  
25.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 468 / 932  
(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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Lawrence S Wittner

Mailing Address 20 Irving St

City Albany State NY Zip Code 12202-1312

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	0	6

Transaction ID: SA11A1.26376

Amount of Each Receipt this Period  
25.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Lawrence S Wittner

Mailing Address 20 Irving St

City Albany State NY Zip Code 12202-1312

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	0	6

Transaction ID: SA11A1.26377

Amount of Each Receipt this Period  
35.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Lincoln Wolfenstein

Mailing Address 5853 Marlborough Rd

City Pittsburgh State PA Zip Code 15217-1415

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	0	6

Transaction ID: SA11A1.26379

Amount of Each Receipt this Period  
200.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 469 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Lincoln Wolfenstein Mailing Address 5853 Marlborough Rd City Pittsburgh State PA Zip Code 15217-1415 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.26378 Amount of Each Receipt this Period 200.00 Earmark to Sherrod Brown (OH-00S) <b>[MEMO ITEM]</b>
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>B.</b> Full Name (Last, First, Middle Initial) Daniel Wolter Mailing Address 1134 Walnut St City Napa State CA Zip Code 94559-2208 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.26380 Amount of Each Receipt this Period 50.00 Earmark to Diane Farrell (CT-04H) <b>[MEMO ITEM]</b>
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>C.</b> Full Name (Last, First, Middle Initial) Daniel Wolter Mailing Address 1134 Walnut St City Napa State CA Zip Code 94559-2208 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.26381 Amount of Each Receipt this Period 50.00 Earmark to Joseph A. Sestak (PA-07H) <b>[MEMO ITEM]</b>
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 470 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
Margaret E Wood

Mailing Address 55 W 71st St Apt 15

City State Zip Code  
New York NY 10023-4187

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

**Transaction ID:** SA11A1.26382

Amount of Each Receipt this Period  
25.00

Earmark to Sherrod Brown (OH-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Robert R Worth

Mailing Address 1220 Park Ave

City State Zip Code  
New York NY 10128-1733

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2006

**Transaction ID:** SA11A1.26383

Amount of Each Receipt this Period  
150.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Robert R Worth

Mailing Address 1220 Park Ave

City State Zip Code  
New York NY 10128-1733

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2006

**Transaction ID:** SA11A1.26384

Amount of Each Receipt this Period  
100.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... 0.00

**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 471 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Robert R Worth Mailing Address 1220 Park Ave City New York State NY Zip Code 10128-1733 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006 <b>Transaction ID:</b> SA11A1.26385 Amount of Each Receipt this Period 150.00 Earmark to Benjamin Cardin (MD-00S) <b>[MEMO ITEM]</b>
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>B.</b> Full Name (Last, First, Middle Initial) Robert R Worth Mailing Address 1220 Park Ave City New York State NY Zip Code 10128-1733 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006 <b>Transaction ID:</b> SA11A1.26386 Amount of Each Receipt this Period 100.00 Earmark to Daniel Akada (HI-00S) <b>[MEMO ITEM]</b>
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>C.</b> Full Name (Last, First, Middle Initial) Robert R Worth Mailing Address 1220 Park Ave City New York State NY Zip Code 10128-1733 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006 <b>Transaction ID:</b> SA11A1.26387 Amount of Each Receipt this Period 150.00 Earmark to Bruce Braley (IA-01H) <b>[MEMO ITEM]</b>
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<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 472 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Robert R Worth		Date of Receipt M M / D D / Y Y Y Y Y 09 / 27 / 2006	
Mailing Address 1220 Park Ave		<b>Transaction ID:</b> SA11A1.26388	
City State Zip Code New York NY 10128-1733		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Joseph A. Sestak (PA-07H)	
Name of Employer Retired Occupation Retired		<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ .00	

<b>B.</b> Full Name (Last, First, Middle Initial) Robert R Worth		Date of Receipt M M / D D / Y Y Y Y Y 09 / 27 / 2006	
Mailing Address 1220 Park Ave		<b>Transaction ID:</b> SA11A1.26389	
City State Zip Code New York NY 10128-1733		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Jerry McNerny (CA-11H)	
Name of Employer Retired Occupation Retired		<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ .00	

<b>C.</b> Full Name (Last, First, Middle Initial) Robert R Worth		Date of Receipt M M / D D / Y Y Y Y Y 09 / 27 / 2006	
Mailing Address 1220 Park Ave		<b>Transaction ID:</b> SA11A1.26390	
City State Zip Code New York NY 10128-1733		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		Earmark to Patty Wetterling (MN-06H)	
Name of Employer Retired Occupation Retired		<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 473 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Robert R Worth

Mailing Address 1220 Park Ave

City State Zip Code  
New York NY 10128-1733

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 27 / 2006

Transaction ID: SA11A1.26391

Amount of Each Receipt this Period  
150.00

Earmark to John Cranley (OH-01H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Robert R Worth

Mailing Address 1220 Park Ave

City State Zip Code  
New York NY 10128-1733

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 27 / 2006

Transaction ID: SA11A1.26392

Amount of Each Receipt this Period  
150.00

Earmark to Diane Farrell (CT-04H)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Robert R Worth

Mailing Address 1220 Park Ave

City State Zip Code  
New York NY 10128-1733

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 27 / 2006

Transaction ID: SA11A1.26393

Amount of Each Receipt this Period  
100.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

**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 474 / 932
	<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Robert R Worth Mailing Address 1220 Park Ave City New York State NY Zip Code 10128-1733 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.26394 Amount of Each Receipt this Period 150.00 Earmark to Eric Massa (NY-09H) <b>[MEMO ITEM]</b>
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>B.</b> Full Name (Last, First, Middle Initial) Robert R Worth Mailing Address 1220 Park Ave City New York State NY Zip Code 10128-1733 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.26395 Amount of Each Receipt this Period 250.00 Earmark to John Tester (M-T-00S) <b>[MEMO ITEM]</b>
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>C.</b> Full Name (Last, First, Middle Initial) Robert R Worth Mailing Address 1220 Park Ave City New York State NY Zip Code 10128-1733 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.26396 Amount of Each Receipt this Period 150.00 Earmark to Sherrod Brown (OH-00S) <b>[MEMO ITEM]</b>
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>0.00</b>
<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 475 / 932  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
George C Wright

Mailing Address 5346 County Road 32

City State Zip Code  
Norwich NY 13815-3404

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.26397

Amount of Each Receipt this Period  
15.00

Earmark to Daniel Akada (HI-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
George C Wright

Mailing Address 5346 County Road 32

City State Zip Code  
Norwich NY 13815-3404

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.26398

Amount of Each Receipt this Period  
15.00

Earmark to Robert C. Byrd (WV-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
George C Wright

Mailing Address 5346 County Road 32

City State Zip Code  
Norwich NY 13815-3404

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

Transaction ID: SA11A1.26399

Amount of Each Receipt this Period  
15.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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: <span style="float: right;">PAGE 476 / 932</span> (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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

<b>A.</b> Full Name (Last, First, Middle Initial) George C Wright Mailing Address 5346 County Road 32 City State Zip Code Norwich NY 13815-3404 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.26400 Amount of Each Receipt this Period 15.00 Earmark to Benjamin Cardin (MD-00S) <b>[MEMO ITEM]</b>
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00

<b>B.</b> Full Name (Last, First, Middle Initial) George C Wright Mailing Address 5346 County Road 32 City State Zip Code Norwich NY 13815-3404 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.26401 Amount of Each Receipt this Period 15.00 Earmark to Bernie Sanders (VT-00S) <b>[MEMO ITEM]</b>
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00

<b>C.</b> Full Name (Last, First, Middle Initial) George C Wright Mailing Address 5346 County Road 32 City State Zip Code Norwich NY 13815-3404 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 <b>Transaction ID:</b> SA11A1.26402 Amount of Each Receipt this Period 15.00 Earmark to Bob Menendez (NJ-00S) <b>[MEMO ITEM]</b>
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<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 477 / 932  
(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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Vivian Yale

Mailing Address 201 W 70th St Apt 25B

City State Zip Code  
New York NY 10023-4338

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2006

Transaction ID: SA11A1.26403

Amount of Each Receipt this Period  
20.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Howard S Yee

Mailing Address 314 Hennepin Ave Apt 514

City State Zip Code  
Minneapolis MN 55401-1917

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.26404

Amount of Each Receipt this Period  
1.00

Earmark to Bob Casey (PA-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Estelle Yelin

Mailing Address 536 Seven Oaks Rd

City State Zip Code  
Orange NJ 07050-3122

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2006

Transaction ID: SA11A1.26405

Amount of Each Receipt this Period  
50.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 478 / 932  
(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)  
**COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND**

**A.** Full Name (Last, First, Middle Initial)  
B. York

Mailing Address 2 Garrison Rd

City State Zip Code  
**Burnt Hills NY 12027-9765**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 25 2006**

**Transaction ID: SA11A1.26407**

Amount of Each Receipt this Period  
50.00

Earmark to Joseph A. Sestak (PA-07H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Jacques L Zakin

Mailing Address 6550 Evening St

City State Zip Code  
**Worthington OH 43085-3072**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 25 2006**

**Transaction ID: SA11A1.26408**

Amount of Each Receipt this Period  
100.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Jacques L Zakin

Mailing Address 6550 Evening St

City State Zip Code  
**Worthington OH 43085-3072**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
**09 25 2006**

**Transaction ID: SA11A1.26409**

Amount of Each Receipt this Period  
100.00

Earmark to Benjamin Cardin (MD-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 479 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Jacques L Zakin

Mailing Address 6550 Evening St

City State Zip Code  
Worthington OH 43085-3072

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  
 /  /

Transaction ID: SA11A1.26410

Amount of Each Receipt this Period  
 50.00

Earmark to Zack Space (OH-19H)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Roberto Zarate

Mailing Address 4141 Cambridge Rd

City State Zip Code  
La Canada Flintrid CA 91011-4003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 .00

Date of Receipt  
 /  /

Transaction ID: SA11A1.26412

Amount of Each Receipt this Period  
 50.00

Earmark to Ned Lamont (CT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Beatrice Zieger

Mailing Address 8941 Wonderland Park Ave

City State Zip Code  
Los Angeles CA 90046-1429

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 800.00

Date of Receipt  
 /  /

Transaction ID: SA11A1.27611

Amount of Each Receipt this Period  
 800.00

**SUBTOTAL** of Receipts This Page (optional) ..... ►  **800.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 480 / 932  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Beatrice Zieger

Mailing Address 8941 Wonderland Park Ave

City State Zip Code  
Los Angeles CA 90046-1429

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
09 / 27 / 2006

Transaction ID: SA11A1.27612

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Ellen Zweibel

Mailing Address 1511 Rutledge St

City State Zip Code  
Madison WI 53703-3836

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 25 / 2006

Transaction ID: SA11A1.26413

Amount of Each Receipt this Period  
25.00

Earmark to Bernie Sanders (VT-00S)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Ellen Zweibel

Mailing Address 1511 Rutledge St

City State Zip Code  
Madison WI 53703-3836

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
09 / 25 / 2006

Transaction ID: SA11A1.26414

Amount of Each Receipt this Period  
25.00

Earmark to John Tester (M-T-00S)

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 200.00

**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 481 / 932

(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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
Ellen Zweibel

Mailing Address 1511 Rutledge St

City State Zip Code  
Madison WI 53703-3836

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
MM / DD / YYYY  
09 / 25 / 2006

Transaction ID: SA11A1.26415

Amount of Each Receipt this Period  
25.00

Earmark to Bob Menendez (NJ-00S)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Ellen Zweibel

Mailing Address 1511 Rutledge St

City State Zip Code  
Madison WI 53703-3836

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
MM / DD / YYYY  
09 / 25 / 2006

Transaction ID: SA11A1.26416

Amount of Each Receipt this Period  
25.00

Earmark to Dan Maffei (NY-25H)

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>18825.00</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)

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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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. Cantrell/Cutter</b>		<b>Transaction ID:</b> SB21B.29488 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address 1789 Olive Street		Amount of Each Disbursement this Period 2.55
City Capital Heights	State MD	
Zip Code 20743		
Purpose of Disbursement Printing		
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. COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND</b>		<b>Transaction ID:</b> SB21B.27621 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 6
Mailing Address 322 4TH STREET NE		Amount of Each Disbursement this Period -3525.00
City WASHINGTON	State DC	
Zip Code 20002		
Purpose of Disbursement Postage In-kinds to Candidates, Line 23		
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. Global Payments</b>		<b>Transaction ID:</b> SB21B.24642 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 0 5 / 2 0 0 6
Mailing Address 4 Corporate Square		Amount of Each Disbursement this Period 70.00
City Atlanta	State GA	
Zip Code 30329		
Purpose of Disbursement Merchant Account Fees		
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) ..... ▶	-3452.45
<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. Sisk Mailing Service Inc.</b>		<b>Transaction ID: SB21B.27628</b>																					
Mailing Address 203 Log Canoe Circle		Date of Disbursement																					
City Stevensville State MD Zip Code 21666		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
Purpose of Disbursement Postage		Amount of Each Disbursement this Period																					
Candidate Name		1475.61																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Category/Type																					
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. Sisk Mailing Service Inc.</b>		<b>Transaction ID: SB21B.27637</b>																					
Mailing Address 203 Log Canoe Circle		Date of Disbursement																					
City Stevensville State MD Zip Code 21666		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
Purpose of Disbursement Printing		Amount of Each Disbursement this Period																					
Candidate Name		2504.61																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Category/Type																					
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. Wachovia Bank</b>		<b>Transaction ID: SB21B.24641</b>																					
Mailing Address 215 Pennsylvania Avenue SE		Date of Disbursement																					
City Washington State DC Zip Code 20003		<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>2</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	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	2		2	0	0	6														
Purpose of Disbursement Bank Fees		Amount of Each Disbursement this Period																					
Candidate Name		42.75																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Category/Type																					
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) .....	<b>4022.97</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>570.52</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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. AKAKA IN 2006</b>		Transaction ID: SB23.27381 Date of Disbursement 09 / 05 / 2006
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 25.00
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by CreditCard-Siegla, A Joanne Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
Category/Type		

Full Name (Last, First, Middle Initial) <b>B. AKAKA IN 2006</b>		Transaction ID: SB23.24688 Date of Disbursement 09 / 06 / 2006
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 25.00
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Plonsey, Robert Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
Category/Type		

Full Name (Last, First, Middle Initial) <b>C. AKAKA IN 2006</b>		Transaction ID: SB23.24701 Date of Disbursement 09 / 06 / 2006
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 25.00
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Rochlin, Robert S Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
Category/Type		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. AKAKA IN 2006</b>		Transaction ID: SB23.24713 Date of Disbursement 09 / 06 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 20.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Soffler, Judy W Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. AKAKA IN 2006</b>		Transaction ID: SB23.24790 Date of Disbursement 09 / 06 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 20.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Gingher, Barbara J Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. AKAKA IN 2006</b>		Transaction ID: SB23.24807 Date of Disbursement 09 / 06 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 25.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Mitchell, Glen H Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. AKAKA IN 2006</b>		Transaction ID: SB23.27395 Date of Disbursement 09 / 06 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 100.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by CreditCard-Gardner, Sheryl Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. AKAKA IN 2006</b>		Transaction ID: SB23.27412 Date of Disbursement 09 / 14 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 100.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by CreditCard-Nickerson, Lawrie Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. AKAKA IN 2006</b>		Transaction ID: SB23.26483 Date of Disbursement 09 / 19 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 10.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Stone, Pablo Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. AKAKA IN 2006</b>		Transaction ID: SB23.26484 Date of Disbursement 09 / 19 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 50.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Rice, Harry E Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. AKAKA IN 2006</b>		Transaction ID: SB23.26492 Date of Disbursement 09 / 19 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 20.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-MacKay, Dorothy Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. AKAKA IN 2006</b>		Transaction ID: SB23.26502 Date of Disbursement 09 / 19 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 50.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-White, Allyn B Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. AKAKA IN 2006</b>		Transaction ID: SB23.26508 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 25.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Sato, Ralph I Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. AKAKA IN 2006</b>		Transaction ID: SB23.26518 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 1.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Klein, Aline Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. AKAKA IN 2006</b>		Transaction ID: SB23.26525 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 10.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Jones, Carolyn E. Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. AKAKA IN 2006</b>		Transaction ID: SB23.26546 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 10.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Metzger, Bert L Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. AKAKA IN 2006</b>		Transaction ID: SB23.26561 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 100.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Creelman, James Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. AKAKA IN 2006</b>		Transaction ID: SB23.26574 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 10.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Mosgofian, Seth D Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. AKAKA IN 2006</b>		Transaction ID: SB23.26609 Date of Disbursement 09 / 19 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 50.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Baker, Marshall Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. AKAKA IN 2006</b>		Transaction ID: SB23.26661 Date of Disbursement 09 / 19 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 100.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Munnich, Kurt A Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. AKAKA IN 2006</b>		Transaction ID: SB23.26677 Date of Disbursement 09 / 19 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 10.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Eger, William H Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. AKAKA IN 2006</b>		Transaction ID: SB23.26704 Date of Disbursement 09 / 19 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 10.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Gerstenfeld, Sol L Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. AKAKA IN 2006</b>		Transaction ID: SB23.26722 Date of Disbursement 09 / 19 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 50.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Harris, Marion P Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. AKAKA IN 2006</b>		Transaction ID: SB23.26731 Date of Disbursement 09 / 19 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 50.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Jones, Bernadette B Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. AKAKA IN 2006</b>		Transaction ID: SB23.26755 Date of Disbursement 09 / 19 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 100.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Kemble, Jean A Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. AKAKA IN 2006</b>		Transaction ID: SB23.26767 Date of Disbursement 09 / 19 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 80.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Loescher, Aase A Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. AKAKA IN 2006</b>		Transaction ID: SB23.26781 Date of Disbursement 09 / 19 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 35.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Ludwig, Robert A Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. AKAKA IN 2006</b>		Transaction ID: SB23.26792 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 50.00
City HONOLULU State HI Zip Code 96802	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Nielsen, John W Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. AKAKA IN 2006</b>		Transaction ID: SB23.26797 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 17.00
City HONOLULU State HI Zip Code 96802	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Oestreich, Alan E Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. AKAKA IN 2006</b>		Transaction ID: SB23.26822 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 100.00
City HONOLULU State HI Zip Code 96802	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Reed, Jack D Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. AKAKA IN 2006</b>		Transaction ID: SB23.26836 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 20.00
City HONOLULU State HI Zip Code 96802	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Rupel, William E Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. AKAKA IN 2006</b>		Transaction ID: SB23.26847 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 50.00
City HONOLULU State HI Zip Code 96802	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Sullivan, Mary B Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. AKAKA IN 2006</b>		Transaction ID: SB23.26852 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 2.00
City HONOLULU State HI Zip Code 96802	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Sullivan, Michael J Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. AKAKA IN 2006</b>		Transaction ID: SB23.26858 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 50.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Valaas, Nancy P Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. AKAKA IN 2006</b>		Transaction ID: SB23.26865 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 15.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Wright, George C Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. AKAKA IN 2006</b>		Transaction ID: SB23.26870 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 10.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Weisberg, Joel Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. AKAKA IN 2006</b>		Transaction ID: SB23.26878 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 35.00
City HONOLULU State HI Zip Code 96802	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Weingart, Mary Brizius		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. AKAKA IN 2006</b>		Transaction ID: SB23.26891 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 10.00
City HONOLULU State HI Zip Code 96802	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Kriegler, Bertha		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. AKAKA IN 2006</b>		Transaction ID: SB23.26909 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 5.00
City HONOLULU State HI Zip Code 96802	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Goldberg, Lois E		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. AKAKA IN 2006</b>		Transaction ID: SB23.26911 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City HONOLULU State HI Zip Code 96802		
Purpose of Disbursement Ermk:by ContribCk-Condoyannis, George E Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. AKAKA IN 2006</b>		Transaction ID: SB23.26927 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>	
City HONOLULU State HI Zip Code 96802			
Purpose of Disbursement Ermk:by ContribCk-Benedict, Elizabeth Candidate Name			Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. AKAKA IN 2006</b>		Transaction ID: SB23.26933 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>	
City HONOLULU State HI Zip Code 96802			
Purpose of Disbursement Ermk:by ContribCk-Kurtz, Corinne Candidate Name			Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. AKAKA IN 2006</b>		Transaction ID: SB23.26942 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City HONOLULU State HI Zip Code 96802		
Purpose of Disbursement Ermk:by ContribCk-Greene, Richard Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. AKAKA IN 2006</b>		Transaction ID: SB23.26954 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City HONOLULU State HI Zip Code 96802		
Purpose of Disbursement Ermk:by ContribCk-Thaw, Arnold Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. AKAKA IN 2006</b>		Transaction ID: SB23.26964 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City HONOLULU State HI Zip Code 96802		
Purpose of Disbursement Ermk:by ContribCk-Martineau, Linden P Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. AKAKA IN 2006</b>		Transaction ID: SB23.26967 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City HONOLULU State HI Zip Code 96802		
Purpose of Disbursement Ermk:by ContribCk-Gallant, Steve Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. AKAKA IN 2006</b>		Transaction ID: SB23.26973 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City HONOLULU State HI Zip Code 96802		
Purpose of Disbursement Ermk:by ContribCk-Wagner, James D Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. AKAKA IN 2006</b>		Transaction ID: SB23.26976 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City HONOLULU State HI Zip Code 96802		
Purpose of Disbursement Ermk:by ContribCk-Engelhaupt, Jean Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. AKAKA IN 2006</b>		Transaction ID: SB23.27001 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 20.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Elliott, Roselyn Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. AKAKA IN 2006</b>		Transaction ID: SB23.27007 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 20.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Sublett, Ramona Gale Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. AKAKA IN 2006</b>		Transaction ID: SB23.27052 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 50.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Mozley, Anita V Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. AKAKA IN 2006</b>		Transaction ID: SB23.27058 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City HONOLULU	State HI Zip Code 96802	
Purpose of Disbursement Ermk:by ContribCk-Michabofsky, Paul		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	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) <b>B. AKAKA IN 2006</b>		Transaction ID: SB23.27073 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City HONOLULU	State HI Zip Code 96802	
Purpose of Disbursement Ermk:by ContribCk-Rusby, Sheroo M		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	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) <b>C. AKAKA IN 2006</b>		Transaction ID: SB23.27087 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City HONOLULU	State HI Zip Code 96802	
Purpose of Disbursement Ermk:by ContribCk-Grewal, David		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. AKAKA IN 2006</b>		Transaction ID: SB23.27101 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 25.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Haig, Rose Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. AKAKA IN 2006</b>		Transaction ID: SB23.27129 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 100.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Crooks, Betty L Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. AKAKA IN 2006</b>		Transaction ID: SB23.27165 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 50.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Lowry, John Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. AKAKA IN 2006</b>		<b>Transaction ID:</b> SB23.27199 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 100.00
City HONOLULU State HI Zip Code 96802	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Renkin, Eugene M Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>B. AKAKA IN 2006</b>		<b>Transaction ID:</b> SB23.27225 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 50.00
City HONOLULU State HI Zip Code 96802	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Tybout, Richard A Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>C. AKAKA IN 2006</b>		<b>Transaction ID:</b> SB23.27230 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 25.00
City HONOLULU State HI Zip Code 96802	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Winsor, Ernest Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. AKAKA IN 2006</b>		Transaction ID: SB23.27248 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 50.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Farber, Joyce R Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>B. AKAKA IN 2006</b>		Transaction ID: SB23.27261 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 10.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Wachob, William K Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>C. AKAKA IN 2006</b>		Transaction ID: SB23.27284 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 5.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by ContribCk-Beaton, Ronald J Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. AKAKA IN 2006</b>		Transaction ID: SB23.27527 Date of Disbursement 09 / 29 / 2006	
Mailing Address PO BOX 3169		Amount of Each Disbursement this Period 50.00	
City HONOLULU State HI Zip Code 96802	Purpose of Disbursement Ermk:by CreditCard-Vagliardo, Margot Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. A LOT OF PEOPLE WHO SUPPORT JEFF BINGAMAN</b>		Transaction ID: SB23.27422 Date of Disbursement 09 / 14 / 2006	
Mailing Address PO BOX 16210		Amount of Each Disbursement this Period 100.00	
City ALBUQUERQUE State NM Zip Code 87191	Purpose of Disbursement Ermk:by CreditCard-Nickerson, Lawrie Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27547 Date of Disbursement 09 / 03 / 2006	
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 50.00	
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by CreditCard-Newman, Ezra T Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27554 Date of Disbursement 09 / 04 / 2006
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City BALTIMORE State MD Zip Code 21209		
Purpose of Disbursement Ermk:by CreditCard-Holt, Robert R Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.24662 Date of Disbursement 09 / 06 / 2006
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City BALTIMORE State MD Zip Code 21209		
Purpose of Disbursement Ermk:by ContribCk-Harper, Harriet P Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.24715 Date of Disbursement 09 / 06 / 2006
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City BALTIMORE State MD Zip Code 21209		
Purpose of Disbursement Ermk:by ContribCk-Soffler, Judy W Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.24742 Date of Disbursement 09 / 06 / 2006
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 10.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Brokstein, William B Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.24767 Date of Disbursement 09 / 06 / 2006
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 20.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Gingher, Barbara J Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.24779 Date of Disbursement 09 / 06 / 2006
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 100.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Furstenberg, Edith H Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.24780 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6	
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 100.00	
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Toney, George R Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.24782 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6	
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 75.00	
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Kramer, Theodora S Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.24808 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6	
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 25.00	
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Mitchell, Glen H Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27417 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City BALTIMORE State MD Zip Code 21209		
Purpose of Disbursement Ermk:by CreditCard-Nickerson, Lawrie Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27427 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City BALTIMORE State MD Zip Code 21209		
Purpose of Disbursement Ermk:by CreditCard-Coffin, Stephen A Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27428 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City BALTIMORE State MD Zip Code 21209		
Purpose of Disbursement Ermk:by CreditCard-Saleski, Alan Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27429 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 200.00  <b>[MEMO ITEM]</b>
City BALTIMORE State MD Zip Code 21209		
Purpose of Disbursement Ermk:by CreditCard-Wolfenstein, Lincoln Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27430 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City BALTIMORE State MD Zip Code 21209		
Purpose of Disbursement Ermk:by CreditCard-Eastman, Sylvia Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27431 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City BALTIMORE State MD Zip Code 21209		
Purpose of Disbursement Ermk:by CreditCard-Perry, Mary Carolyn Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27443 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 50.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by CreditCard-Carlip, Vivian M Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27444 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 25.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by CreditCard-Drew, Bruce A Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27445 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 50.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by CreditCard-Cinquemani, Dorothy K Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27446 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 100.00
City BALTIMORE State MD Zip Code 21209	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Barker, Mary Lee		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27447 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 10.00
City BALTIMORE State MD Zip Code 21209	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Rue, Louis K		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27460 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 50.00
City BALTIMORE State MD Zip Code 21209	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Bloomenthal, Martin		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26615 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 50.00
City BALTIMORE State MD Zip Code 21209	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Brown, Stanley G		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26618 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 100.00
City BALTIMORE State MD Zip Code 21209	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Crooks, Betty L		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26705 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 100.00
City BALTIMORE State MD Zip Code 21209	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Hawkins, Bruce		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26707 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 35.00
City BALTIMORE State MD Zip Code 21209	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Harnack, Curtis Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26732 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 1000.00
City BALTIMORE State MD Zip Code 21209	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Jencks, Christopher Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26776 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 100.00
City BALTIMORE State MD Zip Code 21209	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Lichtenstein, Lawrence Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26837 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 15.00
City BALTIMORE State MD Zip Code 21209	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Stephen, Charles S		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MD District: 03		

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26882 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 250.00
City BALTIMORE State MD Zip Code 21209	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Weart, Spencer R		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MD District: 03		

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26980 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 200.00
City BALTIMORE State MD Zip Code 21209	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Gardner, Sheryl		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MD District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26990 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 1000.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Pretlow, Theresa P Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27472 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 25.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by CreditCard-Krieg, David R Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26432 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 20.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-MacKay, Dorothy Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26433 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City BALTIMORE State MD Zip Code 21209		
Purpose of Disbursement Ermk:by ContribCk-Gesner, Harry H Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26434 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 1.00  <b>[MEMO ITEM]</b>
City BALTIMORE State MD Zip Code 21209		
Purpose of Disbursement Ermk:by ContribCk-Klein, Aline Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26435 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City BALTIMORE State MD Zip Code 21209		
Purpose of Disbursement Ermk:by ContribCk-Jones, Carolyn E. Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26436 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 100.00
City BALTIMORE State MD Zip Code 21209	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Foldy, Roma B.		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MD District: 03		

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26437 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 10.00
City BALTIMORE State MD Zip Code 21209	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Metzger, Bert L		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MD District: 03		

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26438 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 100.00
City BALTIMORE State MD Zip Code 21209	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Creelman, James		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MD District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26439 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 10.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Mosgofian, Seth D Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26440 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 10.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Engelhaupt, Joan Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26441 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 200.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Alpert, Ralph Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26442 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City BALTIMORE State MD Zip Code 21209		
Purpose of Disbursement Ermk:by ContribCk-Baker, Marshall Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26443 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City BALTIMORE State MD Zip Code 21209		
Purpose of Disbursement Ermk:by ContribCk-Driscoll, Charles F Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26444 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 400.00  <b>[MEMO ITEM]</b>
City BALTIMORE State MD Zip Code 21209		
Purpose of Disbursement Ermk:by ContribCk-Franklin, Naomi C Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26445 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City BALTIMORE State MD Zip Code 21209		
Purpose of Disbursement Ermk:by ContribCk-Gerstenfeld, Sol L Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26446 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City BALTIMORE State MD Zip Code 21209		
Purpose of Disbursement Ermk:by ContribCk-Harris, Marion P Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26447 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City BALTIMORE State MD Zip Code 21209		
Purpose of Disbursement Ermk:by ContribCk-Jones, Bernadette B Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26448 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City BALTIMORE State MD Zip Code 21209		
Purpose of Disbursement Ermk:by ContribCk-Jindrich, Denise Lobet Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26449 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City BALTIMORE State MD Zip Code 21209		
Purpose of Disbursement Ermk:by ContribCk-Johnson, Roger D Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26450 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City BALTIMORE State MD Zip Code 21209		
Purpose of Disbursement Ermk:by ContribCk-Kroot, Tina Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26451 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 80.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Loescher, Aase A Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26452 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 100.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Meislin, Barbara J Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26453 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 100.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Munnich, Kurt A Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26454 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 50.00
City BALTIMORE State MD Zip Code 21209	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Nielsen, John W		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MD District: 03		

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26455 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 17.00
City BALTIMORE State MD Zip Code 21209	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Oestreich, Alan E		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MD District: 03		

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26456 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 200.00
City BALTIMORE State MD Zip Code 21209	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Rodgers, Daniel T		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MD District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26457 Date of Disbursement 09 / 22 / 2006
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City BALTIMORE State MD Zip Code 21209		
Purpose of Disbursement Ermk:by ContribCk-Reed, Jack D Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26458 Date of Disbursement 09 / 22 / 2006	
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>	
City BALTIMORE State MD Zip Code 21209			
Purpose of Disbursement Ermk:by ContribCk-Rupel, William E Candidate Name			Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03			Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26459 Date of Disbursement 09 / 22 / 2006	
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>	
City BALTIMORE State MD Zip Code 21209			
Purpose of Disbursement Ermk:by ContribCk-Sullivan, Mary B Candidate Name			Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03			Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26460 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 2.00
City BALTIMORE State MD Zip Code 21209	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Sullivan, Michael J Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26461 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 50.00
City BALTIMORE State MD Zip Code 21209	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Valaas, Nancy P Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26462 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 15.00
City BALTIMORE State MD Zip Code 21209	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Wright, George C Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26463 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City BALTIMORE State MD Zip Code 21209		
Purpose of Disbursement Ermk:by ContribCk-Weisberg, Joel Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26464 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City BALTIMORE State MD Zip Code 21209		
Purpose of Disbursement Ermk:by ContribCk-Kriegler, Bertha Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26465 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 5.00  <b>[MEMO ITEM]</b>
City BALTIMORE State MD Zip Code 21209		
Purpose of Disbursement Ermk:by ContribCk-Goldberg, Lois E Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26466 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 100.00
City BALTIMORE State MD Zip Code 21209	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Benedict, Elizabeth Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26467 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 15.00
City BALTIMORE State MD Zip Code 21209	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Kurtz, Corinne Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26468 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 20.00
City BALTIMORE State MD Zip Code 21209	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Thaw, Arnold Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26469 Date of Disbursement 09 / 22 / 2006
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 10.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Martineau, Linden P Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26470 Date of Disbursement 09 / 22 / 2006
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 10.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Wagner, James D Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26471 Date of Disbursement 09 / 22 / 2006
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 10.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Makurath, Paul A Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.26472 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 20.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Sublett, Ramona Gale	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27051 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 50.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Ainbinder, Sheila B	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27054 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 10.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Michabofsky, Paul	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27068 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 10.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Rusby, Sheroo M Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27093 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 25.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Cadieux, Gaston L Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27130 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 35.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Carpenter, Dwight W Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27142 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 100.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Fingerhood, Shirley Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27159 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 50.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Lowry, John Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27173 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 25.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Metzger, Albert Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27188 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 100.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Pokorny, Gene Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27191 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 50.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Pine, Nancy Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27222 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 50.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Tybout, Richard A Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27231 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 35.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Watson, Frank L Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27233 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 100.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Zakin, Jacques L Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27243 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 50.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Farber, Joyce R Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27255 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 10.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Wachob, William K Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27264 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 25.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Tommaso, Margaret Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. BEN CARDIN FOR SENATE</b>		Transaction ID: SB23.27278 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 65056		Amount of Each Disbursement this Period 500.00
City BALTIMORE State MD Zip Code 21209	Purpose of Disbursement Ermk:by ContribCk-Rosen, Charles Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BETTY SUTTON FOR CONGRESS</b>		Transaction ID: SB23.24696 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address 1700 W MARKET ST #155		Amount of Each Disbursement this Period 5.00
City AKRON State OH Zip Code 44313	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Roper, Peter G Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 13		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. BETTY SUTTON FOR CONGRESS</b>		Transaction ID: SB23.24655 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 1700 W MARKET ST #155		Amount of Each Disbursement this Period 1.00
City AKRON State OH Zip Code 44313	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Diamond, E Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 13		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. BETTY SUTTON FOR CONGRESS</b>		Transaction ID: SB23.26617 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 1700 W MARKET ST #155		Amount of Each Disbursement this Period 35.00
City AKRON State OH Zip Code 44313	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Craig, Alex Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 13		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BETTY SUTTON FOR CONGRESS</b>		Transaction ID: SB23.26654 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 1700 W MARKET ST #155		Amount of Each Disbursement this Period 10.00
City AKRON State OH Zip Code 44313	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Eger, William H Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 13		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. BETTY SUTTON FOR CONGRESS</b>		Transaction ID: SB23.27121 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2006
Mailing Address 1700 W MARKET ST #155		Amount of Each Disbursement this Period 50.00
City AKRON State OH Zip Code 44313	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Barsanti, Richard H Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 13		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24658 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 30.00
City Philadelphia State PA Zip Code 19110	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Greenwood, Robert Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24664 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Janis, Allen I Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24667 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 1000.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Jencks, Christopher Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24668 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Jindrich, Denise Lobet Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24669 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 75.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Juretschke, Hellmut J Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24671 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 500.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Kohnke, Peter C Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24672 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Kelly, Patricia A Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24675 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Lindsay, James E	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24677 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Moore, Gertrude B	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24680 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Nielsen, John W	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24681 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Norton, Karl K Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24682 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 5.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Piggott, Harold W Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24689 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Renkin, Eugene M Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24692 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6	
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00	
City Philadelphia State PA Zip Code 19110	Purpose of Disbursement Ermk:by ContribCk-Rappaport, Irving Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24693 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6	
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 25.00	
City Philadelphia State PA Zip Code 19110	Purpose of Disbursement Ermk:by ContribCk-Rogatz, Peter Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24699 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6	
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 5.00	
City Philadelphia State PA Zip Code 19110	Purpose of Disbursement Ermk:by ContribCk-Roper, Peter G Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
BOB CASEY FOR PENNSYLVANIA

Mailing Address PO BOX 22469

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement  
Ermk:by ContribCk-Rochlin, Robert S  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: PA District: 00  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.24702  
Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
BOB CASEY FOR PENNSYLVANIA

Mailing Address PO BOX 22469

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement  
Ermk:by ContribCk-Rall, Wilfrid  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: PA District: 00  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.24703  
Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
BOB CASEY FOR PENNSYLVANIA

Mailing Address PO BOX 22469

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement  
Ermk:by ContribCk-Stunkard, Albert J  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: PA District: 00  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.24704  
Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ▶

0.00

**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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24706 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Skinner, John R Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24714 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Soffler, Judy W Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24716 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Sussman, Julie Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24720 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Schlaff, Robert J Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24721 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Tybout, Richard A Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24724 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Weisberg, Joel Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24726 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Wajda, Louis W Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24727 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Weart, Spencer R Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24729 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Yasuhara, Ann Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24731 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 200.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Light, Ivan H Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24732 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006	
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 1.00  <b>[MEMO ITEM]</b>	
City Philadelphia State PA Zip Code 19110			
Purpose of Disbursement Ermk:by ContribCk-O'Neil, Walter R Candidate Name			Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00			Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24733 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006	
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>	
City Philadelphia State PA Zip Code 19110			
Purpose of Disbursement Ermk:by ContribCk-Thorman, Dorothy Candidate Name			Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00			Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24738 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Gerber, Adele Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24740 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 200.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Wolfenstein, Lincoln Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24741 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Haughton, Theresa M Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24748 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Cohen, Miriam Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24749 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Kreidelcamp, Dane Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24750 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Szent-Gyorgyi, Andrew Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24751 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Aiken, Felix R Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24752 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Wagner, James D Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24753 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 15.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Regan, Austin P Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24754 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Newsome, W Roy Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24757 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Kesavulu, Venugopal Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24758 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 30.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Rosenblatt, Paul C Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24761 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Shields, C A Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24762 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Grass, Melinda C Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24763 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 18.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Neusom, Sherman G Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)  
BOB CASEY FOR PENNSYLVANIA

Mailing Address PO BOX 22469

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement  
Ermk:by ContribCk-Heston, Floyd

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: PA District: 00

Transaction ID: SB23.24764

Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

2.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)  
BOB CASEY FOR PENNSYLVANIA

Mailing Address PO BOX 22469

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement  
Ermk:by ContribCk-Furstenberg, Edith H

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: PA District: 00

Transaction ID: SB23.24777

Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)  
BOB CASEY FOR PENNSYLVANIA

Mailing Address PO BOX 22469

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement  
Ermk:by ContribCk-Furstenberg, Edith H

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: PA District: 00

Transaction ID: SB23.24778

Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

0.00

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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24792 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 30.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Collins, David Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24794 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Saunders, Kathy Boisve Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24795 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Harvey, Dorothea W Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24796 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Scott, Leslie J Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24799 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Creem, Harvey A Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24801 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Macomber, Richard W Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24802 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Pierson, Arthur M Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24803 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Servis, Jeanne S Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24804 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Healy, John E Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24805 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Monroe, Christopher J Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24809 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 5.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Kass, Norman H Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24810 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Heald, Mark A Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24811 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Metzger, Bert L Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24814 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Gould, Mark Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24815 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Wells, Roger A Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
BOB CASEY FOR PENNSYLVANIA

Mailing Address PO BOX 22469

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement  
Ermk:by ContribCk-Burton, Marion H  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: PA District: 00  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.24819

Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

35.00

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
BOB CASEY FOR PENNSYLVANIA

Mailing Address PO BOX 22469

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement  
Ermk:by ContribCk-Magan, John R  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: PA District: 00  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.24820

Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
BOB CASEY FOR PENNSYLVANIA

Mailing Address PO BOX 22469

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement  
Ermk:by ContribCk-Bootz, Margaret  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: PA District: 00  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.24822

Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24825 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-McKnight, Shirley Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24826 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Peterson, William A Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24827 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Kistler, David W. Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24833 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Ainsworth, Anne K Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24835 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Avirett, Margery B Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24837 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 5.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Buchanan, Donald W Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24840 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00
City Philadelphia State PA Zip Code 19110	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Brogan, John A		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24842 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 100.00
City Philadelphia State PA Zip Code 19110	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Barsanti, Richard H		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24845 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00
City Philadelphia State PA Zip Code 19110	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Corkran, David H		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24847 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Dash, Jay Gregory Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24849 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-de Zafra, Robert Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24850 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Fry, Arthur Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.24852 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Findlay, James F Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27419 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Nickerson, Lawrie Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27457 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-James, Nancy Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.26474 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 300.00
City Philadelphia State PA Zip Code 19110	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Plaut, Johanna M		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.26478 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 35.00
City Philadelphia State PA Zip Code 19110	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-McCaslin, John		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.26479 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 125.00
City Philadelphia State PA Zip Code 19110	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Derus, David		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.26480 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Bennett, Elizabeth Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.26511 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 1.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Yee, Howard S Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.26529 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Betzer, Peter R. Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.26549 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Fleming, Lis L Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.26552 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Dean, Dorothy G Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.26564 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Newman, Connie Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.26581 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Oswain, Janet E Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.26589 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Albrecht, Kathryn Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.26593 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Adler, Susan S Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.26601 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Brooks, Katherine Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.26603 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 40.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Black, Linda C Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.26632 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Colby, Richard H Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
BOB CASEY FOR PENNSYLVANIA

Mailing Address PO BOX 22469

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement  
Ermk:by ContribCk-Christy, Robert W  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: PA District: 00  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.26634

Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
BOB CASEY FOR PENNSYLVANIA

Mailing Address PO BOX 22469

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement  
Ermk:by ContribCk-Meral, Gerald H  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: PA District: 00  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.26657

Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

30.00

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
BOB CASEY FOR PENNSYLVANIA

Mailing Address PO BOX 22469

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement  
Ermk:by ContribCk-Mullin, Sandra C  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: PA District: 00  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.26666

Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
BOB CASEY FOR PENNSYLVANIA

Mailing Address PO BOX 22469

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement  
Ermk:by ContribCk-Mitchell, William J  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: PA District: 00  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.26667

Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
BOB CASEY FOR PENNSYLVANIA

Mailing Address PO BOX 22469

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement  
Ermk:by ContribCk-Golodetz, Arnold  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: PA District: 00  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.26688

Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
BOB CASEY FOR PENNSYLVANIA

Mailing Address PO BOX 22469

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement  
Ermk:by ContribCk-Gale, Anne W  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: PA District: 00  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.26693

Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

35.00

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ▶

0.00

**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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)  
BOB CASEY FOR PENNSYLVANIA

Mailing Address PO BOX 22469

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement  
Ermk:by ContribCk-Gardner, Sheryl  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: PA District: 00  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.26697  
Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

300.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)  
BOB CASEY FOR PENNSYLVANIA

Mailing Address PO BOX 22469

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement  
Ermk:by ContribCk-Haddon, Harry H  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: PA District: 00  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.26711  
Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

35.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)  
BOB CASEY FOR PENNSYLVANIA

Mailing Address PO BOX 22469

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement  
Ermk:by ContribCk-Harris, Marion P  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: PA District: 00  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.26713  
Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.26723 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Hobbs, Willard E Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.26799 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Oskamp, Stuart Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.26875 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Weingart, Mary Brizius Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.26912 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 30.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Fernbach, Harvey Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.26920 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 200.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Cammack, Edward Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.26939 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Melampy, Michael Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.26957 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 10.00	
City Philadelphia State PA Zip Code 19110	Purpose of Disbursement Ermk:by ContribCk-Griffin, James J Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.26968 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00	
City Philadelphia State PA Zip Code 19110	Purpose of Disbursement Ermk:by ContribCk-Miller, Mark Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.26988 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 250.00	
City Philadelphia State PA Zip Code 19110	Purpose of Disbursement Ermk:by ContribCk-Walsh, Roger N. Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.26998 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Winne, Barbara J Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27473 Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Silver, Michael F Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27488 Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Goldstein, Dora B Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)  
BOB CASEY FOR PENNSYLVANIA

Mailing Address PO BOX 22469

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement  
Ermk:by ContribCk-Rusby, Sheroo M  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: PA District: 00  
Disbursement For: 2006  Primary  General  Other (specify) ▼

Transaction ID: SB23.27067

Date of Disbursement

09 / 27 / 2006

Amount of Each Disbursement this Period

10.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)  
BOB CASEY FOR PENNSYLVANIA

Mailing Address PO BOX 22469

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement  
Ermk:by ContribCk-Walsh, Mary H  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: PA District: 00  
Disbursement For: 2006  Primary  General  Other (specify) ▼

Transaction ID: SB23.27089

Date of Disbursement

09 / 27 / 2006

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)  
BOB CASEY FOR PENNSYLVANIA

Mailing Address PO BOX 22469

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement  
Ermk:by ContribCk-Elliston, Angela  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: PA District: 00  
Disbursement For: 2006  Primary  General  Other (specify) ▼

Transaction ID: SB23.27094

Date of Disbursement

09 / 27 / 2006

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

0.00

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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27097 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Salwen, Marie Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27136 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Dumas, Lloyd Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27179 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Mont-Eton, Jean M Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27180 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 500.00	
City Philadelphia State PA Zip Code 19110	Purpose of Disbursement Ermk:by ContribCk-Neilson, Albert P Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27235 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 35.00	
City Philadelphia State PA Zip Code 19110	Purpose of Disbursement Ermk:by ContribCk-Haste, Julester S Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27241 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2006	
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 100.00	
City Philadelphia State PA Zip Code 19110	Purpose of Disbursement Ermk:by ContribCk-Farber, Joyce R Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27267 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Norfleet, Barbara P Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27273 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 2.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Luhar, Jashbhai D Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27274 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 500.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by ContribCk-Rosen, Charles Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27492 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Benson, John L Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27495 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Newman, Ezra T Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27500 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Pines, Jeffrey M Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27501 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Brown, Hamilton B Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27502 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Weart, Spencer R Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27503 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 75.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Potter, Neal Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27504 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Litt, Michael Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27505 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Walba, Harold Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27506 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Cohen, Theodore Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27507 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Vandivere, Stephen C Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27508 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Stern, Evelyn Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27509 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 30.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Swan, June Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27510 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 30.00
City Philadelphia State PA Zip Code 19110	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Swan, June		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27511 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 25.00
City Philadelphia State PA Zip Code 19110	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Moselle, Merritt		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27512 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 200.00
City Philadelphia State PA Zip Code 19110	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Walbridge, Edward		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27513 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Gallant, Steve Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27514 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Schiffmann, Elliott Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27515 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Lee, Susan Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27516 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Sills, Peter Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27517 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Payne, Daniel Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27518 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Teolis, Simon Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27519 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 30.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Perry, Mary Carolyn Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27520 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Larson, Leonard V. Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27521 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Murray, Pamela Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27522 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Powell, Ronald Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27523 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Russell, Paul Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27524 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Siegla, A Joanne Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27525 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Smith, John C Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27526 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Whipple, Sandra Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27529 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Coffin, Stephen A Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
BOB CASEY FOR PENNSYLVANIA

Mailing Address PO BOX 22469

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement  
Ermk:by CreditCard-Carlip, Vivian M  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: PA District: 00  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.27530  
Date of Disbursement

09 / 30 / 2006

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
BOB CASEY FOR PENNSYLVANIA

Mailing Address PO BOX 22469

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement  
Ermk:by CreditCard-Berlinghoff, William  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: PA District: 00  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.27531  
Date of Disbursement

09 / 30 / 2006

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
BOB CASEY FOR PENNSYLVANIA

Mailing Address PO BOX 22469

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement  
Ermk:by CreditCard-Oppenheimer, Philip  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: PA District: 00  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.27532  
Date of Disbursement

09 / 30 / 2006

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27533 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Benson, John L Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27534 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Bolker, Joan L Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27535 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Holt, Joan Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27536 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Moneti, Giancarlo Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27537 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Hanafi, Catherine B Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27538 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Hall, Thomas Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)  
BOB CASEY FOR PENNSYLVANIA

Mailing Address PO BOX 22469

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement  
Ermk:by CreditCard-Morton, Bruce  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: PA District: 00  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.27539

Date of Disbursement

09 / 30 / 2006

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)  
BOB CASEY FOR PENNSYLVANIA

Mailing Address PO BOX 22469

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement  
Ermk:by CreditCard-Lellouche, Mary  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: PA District: 00  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.27540

Date of Disbursement

09 / 30 / 2006

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)  
BOB CASEY FOR PENNSYLVANIA

Mailing Address PO BOX 22469

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement  
Ermk:by CreditCard-Banta, Lynne  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: PA District: 00  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.27541

Date of Disbursement

09 / 30 / 2006

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27542 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Castello, Joseph W Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27543 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Bailer, Elaine Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27544 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2006
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Brown, Mary Grace Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27545 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Rainer, John Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BOB CASEY FOR PENNSYLVANIA</b>		Transaction ID: SB23.27546 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address PO BOX 22469		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Philadelphia State PA Zip Code 19110		
Purpose of Disbursement Ermk:by CreditCard-Sunde, Robert Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. BOB FILNER FOR CONGRESS</b>		Transaction ID: SB23.27392 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 5 / 2 0 0 6
Mailing Address P.O. Box 127868		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City San Diego State CA Zip Code 92112		
Purpose of Disbursement Ermk:by CreditCard-Klein, Marc Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 51	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BOB FILNER FOR CONGRESS</b>		Transaction ID: SB23.26671 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address P.O. Box 127868		Amount of Each Disbursement this Period 10.00	
City San Diego State CA Zip Code 92112	Purpose of Disbursement Ermk:by ContribCk-Eger, William H Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 51	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.24784 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006	
Mailing Address PO Box 390		Amount of Each Disbursement this Period 200.00	
City Waterloo State IA Zip Code 50704	Purpose of Disbursement Ermk:by ContribCk-Shearer, Rees R Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27010 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address PO Box 390		Amount of Each Disbursement this Period 10.00	
City Waterloo State IA Zip Code 50704	Purpose of Disbursement Ermk:by ContribCk-Field, Joyce F Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27012 Date of Disbursement 09 / 19 / 2006
Mailing Address PO Box 390		Amount of Each Disbursement this Period 2.00
City Waterloo State IA Zip Code 50704	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Green, John F		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>B. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27014 Date of Disbursement 09 / 19 / 2006
Mailing Address PO Box 390		Amount of Each Disbursement this Period 25.00
City Waterloo State IA Zip Code 50704	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Mitchell, Glen H		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>C. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27016 Date of Disbursement 09 / 19 / 2006
Mailing Address PO Box 390		Amount of Each Disbursement this Period 100.00
City Waterloo State IA Zip Code 50704	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Creelman, James		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27018 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO Box 390		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Waterloo State IA Zip Code 50704		
Purpose of Disbursement Ermk:by ContribCk-Chase, Theodore Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>B. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27020 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO Box 390		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City Waterloo State IA Zip Code 50704		
Purpose of Disbursement Ermk:by ContribCk-Eger, William H Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>C. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27023 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO Box 390		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City Waterloo State IA Zip Code 50704		
Purpose of Disbursement Ermk:by ContribCk-Johnson, Robert K Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27024 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO Box 390		Amount of Each Disbursement this Period 100.00
City Waterloo State IA Zip Code 50704	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Kaysen, Carl Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>B. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27026 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO Box 390		Amount of Each Disbursement this Period 50.00
City Waterloo State IA Zip Code 50704	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Kerstein, Charles L Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>C. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27028 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO Box 390		Amount of Each Disbursement this Period 50.00
City Waterloo State IA Zip Code 50704	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Plonsey, Robert Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27030 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO Box 390		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Waterloo State IA Zip Code 50704		
Purpose of Disbursement Ermk:by ContribCk-Rochlin, Robert S Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>B. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27032 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO Box 390		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City Waterloo State IA Zip Code 50704		
Purpose of Disbursement Ermk:by ContribCk-Soffler, Judy W Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>C. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27033 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO Box 390		Amount of Each Disbursement this Period 30.00  <b>[MEMO ITEM]</b>
City Waterloo State IA Zip Code 50704		
Purpose of Disbursement Ermk:by ContribCk-Stevens, Kenneth A Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27035 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO Box 390		Amount of Each Disbursement this Period 35.00
City Waterloo State IA Zip Code 50704	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Stocking, Marion K		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	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) <b>B. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27037 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO Box 390		Amount of Each Disbursement this Period 25.00
City Waterloo State IA Zip Code 50704	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Weatherby, Diana K		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	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) <b>C. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27038 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO Box 390		Amount of Each Disbursement this Period 100.00
City Waterloo State IA Zip Code 50704	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Wellman, James M		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27043 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO Box 390		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Waterloo State IA Zip Code 50704		
Purpose of Disbursement Ermk:by ContribCk-Rosenblatt, Paul C Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>B. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27300 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO Box 390		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Waterloo State IA Zip Code 50704		
Purpose of Disbursement Ermk:by ContribCk-Carrothers, Richard L Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>C. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27302 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO Box 390		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City Waterloo State IA Zip Code 50704		
Purpose of Disbursement Ermk:by ContribCk-Holt, Mary B Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A. BRALEY FOR CONGRESS</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 390 City Waterloo State IA Zip Code 50704 Purpose of Disbursement Ermk:by ContribCk-Nussbaum, Wilbur Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.27304 Date of Disbursement 09 / 27 / 2006 Amount of Each Disbursement this Period 5.00 [MEMO ITEM]
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<b>B. BRALEY FOR CONGRESS</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 390 City Waterloo State IA Zip Code 50704 Purpose of Disbursement Ermk:by ContribCk-Berry, Dale L Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.27306 Date of Disbursement 09 / 27 / 2006 Amount of Each Disbursement this Period 100.00 [MEMO ITEM]
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<b>C. BRALEY FOR CONGRESS</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 390 City Waterloo State IA Zip Code 50704 Purpose of Disbursement Ermk:by ContribCk-Pancner, Robert Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.27308 Date of Disbursement 09 / 27 / 2006 Amount of Each Disbursement this Period 25.00 [MEMO ITEM]
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27310 Date of Disbursement 09 / 27 / 2006
Mailing Address PO Box 390		Amount of Each Disbursement this Period 10.00
City Waterloo State IA Zip Code 50704	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Engelhaupt, Joan Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>B. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27312 Date of Disbursement 09 / 27 / 2006
Mailing Address PO Box 390		Amount of Each Disbursement this Period 50.00
City Waterloo State IA Zip Code 50704	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Heymann, Gary m Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>C. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27315 Date of Disbursement 09 / 27 / 2006
Mailing Address PO Box 390		Amount of Each Disbursement this Period 150.00
City Waterloo State IA Zip Code 50704	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Alpert, Ralph Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27317 Date of Disbursement 09 / 27 / 2006
Mailing Address PO Box 390		Amount of Each Disbursement this Period 4.00
City Waterloo State IA Zip Code 50704	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Buchanan, Donald W		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>B. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27318 Date of Disbursement 09 / 27 / 2006
Mailing Address PO Box 390		Amount of Each Disbursement this Period 20.00
City Waterloo State IA Zip Code 50704	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Dumas, Lloyd		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>C. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27320 Date of Disbursement 09 / 27 / 2006
Mailing Address PO Box 390		Amount of Each Disbursement this Period 250.00
City Waterloo State IA Zip Code 50704	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Doering, Sarah C		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27322 Date of Disbursement 09 / 27 / 2006
Mailing Address PO Box 390		Amount of Each Disbursement this Period 50.00
City Waterloo State IA Zip Code 50704	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Ferber, Michael K		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>B. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27324 Date of Disbursement 09 / 27 / 2006
Mailing Address PO Box 390		Amount of Each Disbursement this Period 50.00
City Waterloo State IA Zip Code 50704	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Jagendorf, Andre T		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>C. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27325 Date of Disbursement 09 / 27 / 2006
Mailing Address PO Box 390		Amount of Each Disbursement this Period 1000.00
City Waterloo State IA Zip Code 50704	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Jencks, Christopher		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27327 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO Box 390		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Waterloo State IA Zip Code 50704		
Purpose of Disbursement Ermk:by ContribCk-Kates, Inez L Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>B. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27329 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO Box 390		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Waterloo State IA Zip Code 50704		
Purpose of Disbursement Ermk:by ContribCk-Kistiakowsky, Vera Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>C. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27331 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO Box 390		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Waterloo State IA Zip Code 50704		
Purpose of Disbursement Ermk:by ContribCk-Knight, William J Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27333 Date of Disbursement 09 / 27 / 2006
Mailing Address PO Box 390		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Waterloo State IA Zip Code 50704		
Purpose of Disbursement Ermk:by ContribCk-Loescher, Aase A Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>B. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27334 Date of Disbursement 09 / 27 / 2006
Mailing Address PO Box 390		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City Waterloo State IA Zip Code 50704		
Purpose of Disbursement Ermk:by ContribCk-Lord, Charles R Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>C. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27338 Date of Disbursement 09 / 27 / 2006
Mailing Address PO Box 390		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Waterloo State IA Zip Code 50704		
Purpose of Disbursement Ermk:by ContribCk-Muller, Burton H Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27340 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO Box 390		Amount of Each Disbursement this Period 35.00
City Waterloo State IA Zip Code 50704	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Nielsen, John W		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>B. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27342 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO Box 390		Amount of Each Disbursement this Period 5.00
City Waterloo State IA Zip Code 50704	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Neusom, Sherman G		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>C. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27344 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO Box 390		Amount of Each Disbursement this Period 8.00
City Waterloo State IA Zip Code 50704	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Oestreich, Alan E		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27347 Date of Disbursement 09 / 27 / 2006
Mailing Address PO Box 390		Amount of Each Disbursement this Period 25.00
City Waterloo State IA Zip Code 50704	Purpose of Disbursement Ermk:by ContribCk-Reed, Jack D Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27349 Date of Disbursement 09 / 27 / 2006
Mailing Address PO Box 390		Amount of Each Disbursement this Period 5.00
City Waterloo State IA Zip Code 50704	Purpose of Disbursement Ermk:by ContribCk-Roper, Peter G Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27351 Date of Disbursement 09 / 27 / 2006
Mailing Address PO Box 390		Amount of Each Disbursement this Period 30.00
City Waterloo State IA Zip Code 50704	Purpose of Disbursement Ermk:by ContribCk-Sweda, Edward L Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A. BRALEY FOR CONGRESS</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 390 City Waterloo State IA Zip Code 50704 Purpose of Disbursement Ermk:by ContribCk-Swadesh, Joel K Candidate Name		Transaction ID: SB23.27353 Date of Disbursement 09 / 27 / 2006 Amount of Each Disbursement this Period 150.00 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>B. BRALEY FOR CONGRESS</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 390 City Waterloo State IA Zip Code 50704 Purpose of Disbursement Ermk:by ContribCk-Toth, Edward K Candidate Name		Transaction ID: SB23.27355 Date of Disbursement 09 / 27 / 2006 Amount of Each Disbursement this Period 50.00 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>C. BRALEY FOR CONGRESS</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 390 City Waterloo State IA Zip Code 50704 Purpose of Disbursement Ermk:by ContribCk-Tybout, Richard A Candidate Name		Transaction ID: SB23.27356 Date of Disbursement 09 / 27 / 2006 Amount of Each Disbursement this Period 50.00 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27358 Date of Disbursement 09 / 27 / 2006
Mailing Address PO Box 390		Amount of Each Disbursement this Period 50.00
City Waterloo State IA Zip Code 50704	Purpose of Disbursement Ermk:by ContribCk-Siegel, Jack M Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27360 Date of Disbursement 09 / 27 / 2006
Mailing Address PO Box 390		Amount of Each Disbursement this Period 100.00
City Waterloo State IA Zip Code 50704	Purpose of Disbursement Ermk:by ContribCk-Marks, John Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27361 Date of Disbursement 09 / 27 / 2006
Mailing Address PO Box 390		Amount of Each Disbursement this Period 100.00
City Waterloo State IA Zip Code 50704	Purpose of Disbursement Ermk:by ContribCk-Vandeman, Philip R Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27363 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO Box 390		Amount of Each Disbursement this Period 10.00
City Waterloo State IA Zip Code 50704	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Karig, Rita Reichman		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	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) <b>B. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27364 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO Box 390		Amount of Each Disbursement this Period 500.00
City Waterloo State IA Zip Code 50704	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Rosen, Charles		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	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) <b>C. BRALEY FOR CONGRESS</b>		Transaction ID: SB23.27367 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO Box 390		Amount of Each Disbursement this Period 100.00
City Waterloo State IA Zip Code 50704	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Lewis, Everett E		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. Cantrell/Cutter</b>		Transaction ID: SB23.27639 Date of Disbursement 09 / 22 / 2006	
Mailing Address 1789 Olive Street		Amount of Each Disbursement this Period 750.00	
City Capital Heights	State MD	Zip Code 20743	Category/ Type
Purpose of Disbursement In-kind: Printing		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name EDWARD M LAMONT			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: CT District: 05		

Full Name (Last, First, Middle Initial) <b>B. Cantrell/Cutter</b>		Transaction ID: SB23.27640 Date of Disbursement 09 / 22 / 2006	
Mailing Address 1789 Olive Street		Amount of Each Disbursement this Period 750.00	
City Capital Heights	State MD	Zip Code 20743	Category/ Type
Purpose of Disbursement In-kind: Printing		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name SHERROD BROWN			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 00		

Full Name (Last, First, Middle Initial) <b>C. CARPER FOR SENATE</b>		Transaction ID: SB23.27380 Date of Disbursement 09 / 04 / 2006	
Mailing Address 19 EAST COMMONS BLVD 2nd Fl.		Amount of Each Disbursement this Period 25.00	
City NEW CASTLE	State DE	Zip Code 19720	Category/ Type  <b>[MEMO ITEM]</b>
Purpose of Disbursement Ermk:by CreditCard-Holt, Robert R		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1500.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. CARPER FOR SENATE</b>		Transaction ID: SB23.27425 Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2006
Mailing Address 19 EAST COMMONS BLVD 2nd Fl.		Amount of Each Disbursement this Period 100.00
City NEW CASTLE State DE Zip Code 19720	Category/ Type	
Purpose of Disbursement Ermk:by CreditCard-Nickerson, Lawrie		
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>B. CHAFEE FOR SENATE</b>		Transaction ID: SB23.24661 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address PO BOX 7329		Amount of Each Disbursement this Period 50.00
City WARWICK State RI Zip Code 02887	Category/ Type	
Purpose of Disbursement Ermk:by ContribCk-Harper, Harriet P		
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. CHAFEE FOR SENATE</b>		Transaction ID: SB23.24789 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address PO BOX 7329		Amount of Each Disbursement this Period 20.00
City WARWICK State RI Zip Code 02887	Category/ Type	
Purpose of Disbursement Ermk:by ContribCk-Gingher, Barbara J		
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. CITIZENS TO ELECT RICK LARSEN</b>		Transaction ID: SB23.26628 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO Box 326		Amount of Each Disbursement this Period 50.00
City Everett State WA Zip Code 98206	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Crooks, Betty L		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 02	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. COLEEN ROWLEY FOR CONGRESS</b>		Transaction ID: SB23.27432 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address P.O. Box 241598		Amount of Each Disbursement this Period 100.00
City Apple Valley State MN Zip Code 55124	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Schiffmann, Elliott		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 02	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. COLEEN ROWLEY FOR CONGRESS</b>		Transaction ID: SB23.26670 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address P.O. Box 241598		Amount of Each Disbursement this Period 10.00
City Apple Valley State MN Zip Code 55124	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Eger, William H		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 02	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND</b>		<b>Transaction ID: SB23.27622</b> Date of Disbursement
Mailing Address 322 4TH STREET NE		<input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20002
Purpose of Disbursement Ini-kind: Postage & Mailing Exp.		Amount of Each Disbursement this Period
Candidate Name EDWARD M LAMONT		<input type="text" value="1750.00"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: CT District: 05		

Full Name (Last, First, Middle Initial) <b>B. COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND</b>		<b>Transaction ID: SB23.27623</b> Date of Disbursement
Mailing Address 322 4TH STREET NE		<input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20002
Purpose of Disbursement Ini-kind: Postage & Mailing Exp.		Amount of Each Disbursement this Period
Candidate Name SHERROD BROWN		<input type="text" value="1775.00"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: OH District: 00		

Full Name (Last, First, Middle Initial) <b>C. CRANLEY FOR CONGRESS</b>		<b>Transaction ID: SB23.26505</b> Date of Disbursement
Mailing Address 37 W 7TH ST SUITE 804		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City CINCINNATI	State OH	Zip Code 45202
Purpose of Disbursement Ernk:by ContribCk-Henighan, Richard P		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="20.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: OH District: 01		

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3525.00"/>
<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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. CRANLEY FOR CONGRESS</b>		Transaction ID: SB23.26622 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 37 W 7TH ST SUITE 804		Amount of Each Disbursement this Period 50.00
City CINCINNATI State OH Zip Code 45202	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Crooks, Betty L		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. CRANLEY FOR CONGRESS</b>		Transaction ID: SB23.26647 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 37 W 7TH ST SUITE 804		Amount of Each Disbursement this Period 10.00
City CINCINNATI State OH Zip Code 45202	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Eger, William H		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. CRANLEY FOR CONGRESS</b>		Transaction ID: SB23.26802 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 37 W 7TH ST SUITE 804		Amount of Each Disbursement this Period 100.00
City CINCINNATI State OH Zip Code 45202	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Oskamp, Stuart		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. CRANLEY FOR CONGRESS</b>		Transaction ID: SB23.26989 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 37 W 7TH ST SUITE 804		Amount of Each Disbursement this Period 250.00
City CINCINNATI State OH Zip Code 45202	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Walsh, Roger N		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. CRANLEY FOR CONGRESS</b>		Transaction ID: SB23.27113 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 37 W 7TH ST SUITE 804		Amount of Each Disbursement this Period 10.00
City CINCINNATI State OH Zip Code 45202	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Albrecht, Kathryn		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. CRANLEY FOR CONGRESS</b>		Transaction ID: SB23.27277 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 37 W 7TH ST SUITE 804		Amount of Each Disbursement this Period 500.00
City CINCINNATI State OH Zip Code 45202	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Rosen, Charles		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.24697 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 5.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Roper, Peter G Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27449 Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 50.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Litt, Michael Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27461 Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 100.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-MacKenzie, David M Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.26487 Date of Disbursement 09 / 19 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 30.00  <b>[MEMO ITEM]</b>
City Westport State CT Zip Code 06881		
Purpose of Disbursement Ermk:by ContribCk-Collins, David Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.26530 Date of Disbursement 09 / 19 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 2.00  <b>[MEMO ITEM]</b>
City Westport State CT Zip Code 06881		
Purpose of Disbursement Ermk:by ContribCk-Green, John F Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.26547 Date of Disbursement 09 / 19 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City Westport State CT Zip Code 06881		
Purpose of Disbursement Ermk:by ContribCk-Gray, Gibson Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.26560 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 100.00
City Westport State CT Zip Code 06881	Category/ Type	
Purpose of Disbursement Ermk:by ContribCk-Creelman, James		
Candidate Name		[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.26676 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 10.00
City Westport State CT Zip Code 06881	Category/ Type	
Purpose of Disbursement Ermk:by ContribCk-Eger, William H		
Candidate Name		[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.26710 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 35.00
City Westport State CT Zip Code 06881	Category/ Type	
Purpose of Disbursement Ermk:by ContribCk-Hirsch, Henry R		
Candidate Name		[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.26739 Date of Disbursement 09 / 19 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 10.00
City Westport State CT Zip Code 06881	Purpose of Disbursement Ermk:by ContribCk-Johnson, Robert K Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.26747 Date of Disbursement 09 / 19 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 50.00
City Westport State CT Zip Code 06881	Purpose of Disbursement Ermk:by ContribCk-Kerstein, Charles L Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.26841 Date of Disbursement 09 / 19 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 27.00
City Westport State CT Zip Code 06881	Purpose of Disbursement Ermk:by ContribCk-Switkay, Henry Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.26842 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 30.00
City Westport State CT Zip Code 06881	Purpose of Disbursement Ermk:by ContribCk-Stevens, Kenneth A Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.26860 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 25.00
City Westport State CT Zip Code 06881	Purpose of Disbursement Ermk:by ContribCk-Weatherby, Diana K Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.26881 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 50.00
City Westport State CT Zip Code 06881	Purpose of Disbursement Ermk:by ContribCk-Wilson, Ruth H Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.26902 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 1000.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Pretlow, Thomas G		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27478 Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 50.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Carlock, Jeff		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27480 Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 100.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Calkins, Peggy		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27481 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 1000.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Obermayer, Arthur Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27484 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 3 / 2 0 0 6
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 50.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Wolter, Daniel Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27045 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 100.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Lewis, Everett E Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27053 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 35.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Hirshberg, Judith A		
Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT District: 04		

Full Name (Last, First, Middle Initial) <b>B. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27059 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 50.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Carrothers, Richard L		
Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT District: 04		

Full Name (Last, First, Middle Initial) <b>C. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27060 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 35.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Holt, Mary B		
Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT District: 04		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27062 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 20.00
City Westport State CT Zip Code 06881	Purpose of Disbursement Ermk:by ContribCk-Breilid, Erik Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27065 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 5.00
City Westport State CT Zip Code 06881	Purpose of Disbursement Ermk:by ContribCk-Beaton, Ronald J Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27076 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 100.00
City Westport State CT Zip Code 06881	Purpose of Disbursement Ermk:by ContribCk-Berry, Dale L Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27081 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Westport State CT Zip Code 06881		
Purpose of Disbursement Ermk:by ContribCk-Jones, Ellen E Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27082 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City Westport State CT Zip Code 06881		
Purpose of Disbursement Ermk:by ContribCk-Healy, John E Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27105 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City Westport State CT Zip Code 06881		
Purpose of Disbursement Ermk:by ContribCk-Katz, Estelle D Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27106 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 10.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Engelhaupt, Joan Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27116 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 4.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Buchanan, Donald W Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27118 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 25.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Byers, Nina Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27119 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 50.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Barsanti, Richard H Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27126 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 35.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Craig, Alex Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27135 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 18.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Duletsky, Edward Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27137 Date of Disbursement 09 / 27 / 2006	
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 250.00	
City Westport State CT Zip Code 06881	Purpose of Disbursement Ermk:by ContribCk-Doering, Sarah C Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27144 Date of Disbursement 09 / 27 / 2006	
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 100.00	
City Westport State CT Zip Code 06881	Purpose of Disbursement Ermk:by ContribCk-Hawkins, Bruce Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27146 Date of Disbursement 09 / 27 / 2006	
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 50.00	
City Westport State CT Zip Code 06881	Purpose of Disbursement Ermk:by ContribCk-Jagendorf, Andre T Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27147 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 1000.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Jencks, Christopher Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27149 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 25.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Kates, Inez L Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27152 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 50.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Kistiakowsky, Vera Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27156 Date of Disbursement 09 / 27 / 2006	
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 50.00	
City Westport State CT Zip Code 06881	Purpose of Disbursement Ermk:by ContribCk-Loescher, Aase A Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT      District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27158 Date of Disbursement 09 / 27 / 2006	
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 50.00	
City Westport State CT Zip Code 06881	Purpose of Disbursement Ermk:by ContribCk-Lesser, Gerson T Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT      District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27169 Date of Disbursement 09 / 27 / 2006	
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 100.00	
City Westport State CT Zip Code 06881	Purpose of Disbursement Ermk:by ContribCk-Lamperti, John W Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT      District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27170 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Westport State CT Zip Code 06881		
Purpose of Disbursement Ermk:by ContribCk-Lindsay, James E Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27176 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Westport State CT Zip Code 06881		
Purpose of Disbursement Ermk:by ContribCk-Meislin, Barbara J Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27181 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City Westport State CT Zip Code 06881		
Purpose of Disbursement Ermk:by ContribCk-Nielsen, John W Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27183 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 5.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Neusom, Sherman G		
Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT District: 04		

Full Name (Last, First, Middle Initial) <b>B. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27184 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 8.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Oestreich, Alan E		
Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT District: 04		

Full Name (Last, First, Middle Initial) <b>C. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27197 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 50.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Ragsdale, Clifton W		
Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT District: 04		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27200 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 200.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Richards, Frederic M		
Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27206 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 25.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Reed, Jack D		
Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27208 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 5.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Roper, Peter G		
Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27213 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 30.00
City Westport State CT Zip Code 06881	Purpose of Disbursement Ermk:by ContribCk-Sweda, Edward L Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27216 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 20.00
City Westport State CT Zip Code 06881	Purpose of Disbursement Ermk:by ContribCk-Schoen, Fred Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27217 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 150.00
City Westport State CT Zip Code 06881	Purpose of Disbursement Ermk:by ContribCk-Swadash, Joel K Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27218 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 50.00
City Westport State CT Zip Code 06881	Purpose of Disbursement Ermk:by ContribCk-Toth, Edward K Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27220 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 50.00
City Westport State CT Zip Code 06881	Purpose of Disbursement Ermk:by ContribCk-Tybout, Richard A Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27236 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 50.00
City Westport State CT Zip Code 06881	Purpose of Disbursement Ermk:by ContribCk-Siegel, Jack M Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27239 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 25.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Bridgman-Rees, Carolin		
Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT District: 04		

Full Name (Last, First, Middle Initial) <b>B. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27240 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 35.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Gedanken, Marcia T		
Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT District: 04		

Full Name (Last, First, Middle Initial) <b>C. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27250 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2006
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 50.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Hall, Thomas L		
Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT District: 04		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27252 Date of Disbursement 09 / 27 / 2006	
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 100.00	
City Westport State CT Zip Code 06881	Purpose of Disbursement Ermk:by ContribCk-Marks, John Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27263 Date of Disbursement 09 / 27 / 2006	
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 50.00	
City Westport State CT Zip Code 06881	Purpose of Disbursement Ermk:by ContribCk-Jarvis, Boyer Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27271 Date of Disbursement 09 / 27 / 2006	
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 10.00	
City Westport State CT Zip Code 06881	Purpose of Disbursement Ermk:by ContribCk-Karig, Rita Reichman Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FARRELL FOR CONGRESS</b>		Transaction ID: SB23.27294 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address P.O. Box 5136		Amount of Each Disbursement this Period 50.00
City Westport State CT Zip Code 06881	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Ritchie, Susan F Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. FRANCINE BUSBY FOR CONGRESS</b>		Transaction ID: SB23.24698 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 783 CALLE DE SOTO		Amount of Each Disbursement this Period 5.00
City SAN MARCOS State CA Zip Code 92078	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Roper, Peter G Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 50		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. FRANCINE BUSBY FOR CONGRESS</b>		Transaction ID: SB23.26614 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 783 CALLE DE SOTO		Amount of Each Disbursement this Period 50.00
City SAN MARCOS State CA Zip Code 92078	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Brooks, Stephen A Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 50		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRANCINE BUSBY FOR CONGRESS</b>		Transaction ID: SB23.26652 Date of Disbursement
Mailing Address 783 CALLE DE SOTO		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City SAN MARCOS	State CA	Zip Code 92078
Purpose of Disbursement Ernk:by ContribCk-Eger, William H		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="10.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: CA	District: 50	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.24783 Date of Disbursement
Mailing Address PO BOX 74		<input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2006"/>
City SYRACUSE	State NY	Zip Code 13214
Purpose of Disbursement Ernk:by ContribCk-Shearer, Rees R		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="200.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: NY	District: 25	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27009 Date of Disbursement
Mailing Address PO BOX 74		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City SYRACUSE	State NY	Zip Code 13214
Purpose of Disbursement Ernk:by ContribCk-Field, Joyce F		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="10.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: NY	District: 25	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27011 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 2.00
City SYRACUSE State NY Zip Code 13214	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Green, John F		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27013 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 25.00
City SYRACUSE State NY Zip Code 13214	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Mitchell, Glen H		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27015 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 100.00
City SYRACUSE State NY Zip Code 13214	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Creelman, James		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27017 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 50.00
City SYRACUSE State NY Zip Code 13214	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Chase, Theodore Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27019 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 10.00
City SYRACUSE State NY Zip Code 13214	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Eger, William H Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27021 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 250.00
City SYRACUSE State NY Zip Code 13214	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Gruber, Irving M Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27022 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City SYRACUSE State NY Zip Code 13214		
Purpose of Disbursement Ermk:by ContribCk-Johnson, Robert K Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27025 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City SYRACUSE State NY Zip Code 13214		
Purpose of Disbursement Ermk:by ContribCk-Kerstein, Charles L Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27027 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City SYRACUSE State NY Zip Code 13214		
Purpose of Disbursement Ermk:by ContribCk-Millar, Florence Kate Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27029 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 25.00
City SYRACUSE State NY Zip Code 13214	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Rochlin, Robert S		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27031 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 20.00
City SYRACUSE State NY Zip Code 13214	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Soffler, Judy W		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27034 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 35.00
City SYRACUSE State NY Zip Code 13214	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Stocking, Marion K		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27036 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 25.00
City SYRACUSE State NY Zip Code 13214	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Weatherby, Diana K		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27039 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 35.00
City SYRACUSE State NY Zip Code 13214	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Wittner, Lawrence S		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27040 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 1000.00
City SYRACUSE State NY Zip Code 13214	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Pretlow, Thomas G		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27041 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 30.00  <b>[MEMO ITEM]</b>
City SYRACUSE State NY Zip Code 13214		
Purpose of Disbursement Ermk:by ContribCk-Fernbach, Harvey Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27042 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City SYRACUSE State NY Zip Code 13214		
Purpose of Disbursement Ermk:by ContribCk-Rosenblatt, Paul C Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27301 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City SYRACUSE State NY Zip Code 13214		
Purpose of Disbursement Ermk:by ContribCk-Holt, Mary B Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27303 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 5.00
City SYRACUSE State NY Zip Code 13214	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Nussbaum, Wilbur		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27305 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 100.00
City SYRACUSE State NY Zip Code 13214	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Berry, Dale L		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27307 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 25.00
City SYRACUSE State NY Zip Code 13214	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Pancner, Robert		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27309 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 10.00	
City SYRACUSE State NY Zip Code 13214	Purpose of Disbursement Ermk:by ContribCk-Engelhaupt, Joan Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27311 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 50.00	
City SYRACUSE State NY Zip Code 13214	Purpose of Disbursement Ermk:by ContribCk-Heymann, Gary m Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27313 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 10.00	
City SYRACUSE State NY Zip Code 13214	Purpose of Disbursement Ermk:by ContribCk-Dole, Arthur A Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27314 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 150.00	
City SYRACUSE State NY Zip Code 13214	Purpose of Disbursement Ermk:by ContribCk-Alpert, Ralph Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27316 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 4.00	
City SYRACUSE State NY Zip Code 13214	Purpose of Disbursement Ermk:by ContribCk-Buchanan, Donald W Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27319 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 250.00	
City SYRACUSE State NY Zip Code 13214	Purpose of Disbursement Ermk:by ContribCk-Doering, Sarah C Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27321 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 50.00	
City SYRACUSE State NY Zip Code 13214	Purpose of Disbursement Ermk:by ContribCk-Ferber, Michael K Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27323 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 50.00	
City SYRACUSE State NY Zip Code 13214	Purpose of Disbursement Ermk:by ContribCk-Jagendorf, Andre T Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27326 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 25.00	
City SYRACUSE State NY Zip Code 13214	Purpose of Disbursement Ermk:by ContribCk-Kates, Inez L Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27328 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 50.00	
City SYRACUSE State NY Zip Code 13214	Purpose of Disbursement Ermk:by ContribCk-Kistiakowsky, Vera Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27330 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 100.00	
City SYRACUSE State NY Zip Code 13214	Purpose of Disbursement Ermk:by ContribCk-Knight, William J Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27332 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 50.00	
City SYRACUSE State NY Zip Code 13214	Purpose of Disbursement Ermk:by ContribCk-Loescher, Aase A Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27335 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 50.00
City SYRACUSE State NY Zip Code 13214	Purpose of Disbursement Ermk:by ContribCk-Lesser, Gerson T Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27336 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 25.00
City SYRACUSE State NY Zip Code 13214	Purpose of Disbursement Ermk:by ContribCk-Metzger, Albert Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27337 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 50.00
City SYRACUSE State NY Zip Code 13214	Purpose of Disbursement Ermk:by ContribCk-Muller, Burton H Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27339 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 35.00
City SYRACUSE State NY Zip Code 13214	Purpose of Disbursement Ermk:by ContribCk-Nielsen, John W Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27341 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 5.00
City SYRACUSE State NY Zip Code 13214	Purpose of Disbursement Ermk:by ContribCk-Neusom, Sherman G Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27343 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 8.00
City SYRACUSE State NY Zip Code 13214	Purpose of Disbursement Ermk:by ContribCk-Oestreich, Alan E Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27345 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City SYRACUSE State NY Zip Code 13214		
Purpose of Disbursement Ermk:by ContribCk-Ragsdale, Clifton W Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27346 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City SYRACUSE State NY Zip Code 13214		
Purpose of Disbursement Ermk:by ContribCk-Reed, Jack D Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27348 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 5.00  <b>[MEMO ITEM]</b>
City SYRACUSE State NY Zip Code 13214		
Purpose of Disbursement Ermk:by ContribCk-Roper, Peter G Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27350 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 30.00	
City SYRACUSE State NY Zip Code 13214	Purpose of Disbursement Ermk:by ContribCk-Sweda, Edward L Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27352 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 75.00	
City SYRACUSE State NY Zip Code 13214	Purpose of Disbursement Ermk:by ContribCk-Swadesh, Joel K Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27354 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 50.00	
City SYRACUSE State NY Zip Code 13214	Purpose of Disbursement Ermk:by ContribCk-Toth, Edward K Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27357 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City SYRACUSE State NY Zip Code 13214		
Purpose of Disbursement Ermk:by ContribCk-Siegel, Jack M Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27359 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City SYRACUSE State NY Zip Code 13214		
Purpose of Disbursement Ermk:by ContribCk-Marks, John Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27362 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City SYRACUSE State NY Zip Code 13214		
Purpose of Disbursement Ermk:by ContribCk-Karig, Rita Reichman Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27365 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 25.00
City SYRACUSE      State NY      Zip Code 13214	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Zweibel, Ellen		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY      District: 25		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF DAN MAFFEI</b>		Transaction ID: SB23.27366 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 74		Amount of Each Disbursement this Period 100.00
City SYRACUSE      State NY      Zip Code 13214	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Lewis, Everett E		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY      District: 25		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF KENT CONRAD</b>		Transaction ID: SB23.27556 Date of Disbursement 09 / 04 / 2006
Mailing Address PO BOX 812		Amount of Each Disbursement this Period 25.00
City BISMARCK      State ND      Zip Code 58502	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Holt, Robert R		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND      District: 00		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF KENT CONRAD</b>		Transaction ID: SB23.27557 Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2006	
Mailing Address PO BOX 812		Amount of Each Disbursement this Period 50.00	
City BISMARCK State ND Zip Code 58502	Purpose of Disbursement Ermk:by CreditCard-Barnett, Octo Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF KENT CONRAD</b>		Transaction ID: SB23.24660 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006	
Mailing Address PO BOX 812		Amount of Each Disbursement this Period 50.00	
City BISMARCK State ND Zip Code 58502	Purpose of Disbursement Ermk:by ContribCk-Harper, Harriet P Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF KENT CONRAD</b>		Transaction ID: SB23.24788 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006	
Mailing Address PO BOX 812		Amount of Each Disbursement this Period 20.00	
City BISMARCK State ND Zip Code 58502	Purpose of Disbursement Ermk:by ContribCk-Gingher, Barbara J Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF KENT CONRAD</b>		Transaction ID: SB23.27420 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 6
Mailing Address PO BOX 812		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City BISMARCK State ND Zip Code 58502		
Purpose of Disbursement Ermk:by CreditCard-Nickerson, Lawrie Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF KENT CONRAD</b>		Transaction ID: SB23.26584 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 812		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City BISMARCK State ND Zip Code 58502		
Purpose of Disbursement Ermk:by ContribCk-Oswain, Janet E Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF KENT CONRAD</b>		Transaction ID: SB23.26653 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 812		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City BISMARCK State ND Zip Code 58502		
Purpose of Disbursement Ermk:by ContribCk-Eger, William H Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.27379 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 6
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by CreditCard-Holt, Robert R	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.24656 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by ContribCk-Gray, Gibson	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.24687 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by ContribCk-Plonsey, Robert	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.24712 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by ContribCk-Soffler, Judy W Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.24747 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by ContribCk-Cohen, Miriam Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.24787 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by ContribCk-Gingher, Barbara J Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.27402 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by CreditCard-Rittenberg, William Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.27424 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 6
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by CreditCard-Nickerson, Lawrie Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26477 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 300.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by ContribCk-Plaut, Johanna M Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26482 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ermk:by ContribCk-Stone, Pablo	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <input type="text" value="10.00"/>
State: WV District: 00	<b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26488 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ermk:by ContribCk-Lathrap, Phillip A	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <input type="text" value="250.00"/>
State: WV District: 00	<b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26496 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ermk:by ContribCk-Baldwin, Frank C	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <input type="text" value="100.00"/>
State: WV District: 00	<b>[MEMO ITEM]</b>	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26517 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ermk:by ContribCk-Klein, Aline	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <input type="text" value="1.00"/>
State: WV District: 00	<b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26524 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ermk:by ContribCk-Jones, Carolyn E.	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <input type="text" value="10.00"/>
State: WV District: 00	<b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26527 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ermk:by ContribCk-Hastings, Edwin H	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <input type="text" value="50.00"/>
State: WV District: 00	<b>[MEMO ITEM]</b>	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26528 Date of Disbursement MM / DD / YYYY 09 / 19 / 2006
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by ContribCk-Ryder, Mary Lou Lou Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26534 Date of Disbursement MM / DD / YYYY 09 / 19 / 2006
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by ContribCk-Blackmore, Barbara C Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26545 Date of Disbursement MM / DD / YYYY 09 / 19 / 2006
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by ContribCk-Metzger, Bert L Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26548 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ernk:by ContribCk-Ramseier, Carol J		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="50.00"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: WV	District: 00	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26558 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ernk:by ContribCk-Creelman, James		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="100.00"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: WV	District: 00	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26573 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ernk:by ContribCk-Mosgofian, Seth D		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="10.00"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: WV	District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<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)

PAGE 671 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26579 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by ContribCk-Engelhaupt, Joan Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26587 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by ContribCk-Kriegler-Dols, Patrici Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26627 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by ContribCk-Crooks, Betty L Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26642 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ermk:by ContribCk-Driscoll, Charles F		Amount of Each Disbursement this Period <input type="text" value="60.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: WV District: 00		

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26686 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ermk:by ContribCk-Franklin, Naomi C		Amount of Each Disbursement this Period <input type="text" value="200.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: WV District: 00		

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26703 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ermk:by ContribCk-Gerstenfeld, Sol L		Amount of Each Disbursement this Period <input type="text" value="10.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: WV District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<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)

PAGE 673 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26721 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ernk:by ContribCk-Harris, Marion P		<input type="text" value="50.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>
State: WV District: 00		

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26730 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ernk:by ContribCk-Jones, Bernadette B		<input type="text" value="50.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>
State: WV District: 00		

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26737 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ernk:by ContribCk-Jindrich, Denise Lobet		<input type="text" value="100.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>
State: WV District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26754 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ermk:by ContribCk-Kemble, Jean A		Amount of Each Disbursement this Period <input type="text" value="100.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: WV District: 00		

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26757 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ermk:by ContribCk-Keck, Robert L		Amount of Each Disbursement this Period <input type="text" value="5.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: WV District: 00		

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26766 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ermk:by ContribCk-Loescher, Aase A		Amount of Each Disbursement this Period <input type="text" value="80.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: WV District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26786 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 100.00
City WASHINGTON State DC Zip Code 20036	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Meislin, Barbara J		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26791 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 50.00
City WASHINGTON State DC Zip Code 20036	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Nielsen, John W		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26821 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 100.00
City WASHINGTON State DC Zip Code 20036	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Reed, Jack D		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 676 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26835 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ermk:by ContribCk-Rupel, William E		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="20.00"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: WV	District: 00	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26839 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ermk:by ContribCk-Stavely, Elizabeth W		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="25.00"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: WV	District: 00	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26851 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ermk:by ContribCk-Sullivan, Michael J		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="1.00"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: WV	District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<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)

PAGE 677 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26857 Date of Disbursement																				
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<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>9</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	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		1	9		2	0	0	6													
City WASHINGTON	State DC	Zip Code 20036																				
Purpose of Disbursement Ermk:by ContribCk-Valaas, Nancy P		Amount of Each Disbursement this Period <table border="1"><tr><td>50.00</td></tr></table>	50.00																			
50.00																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: WV	District: 00																					

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26864 Date of Disbursement																				
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<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>9</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	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		1	9		2	0	0	6													
City WASHINGTON	State DC	Zip Code 20036																				
Purpose of Disbursement Ermk:by ContribCk-Wright, George C		Amount of Each Disbursement this Period <table border="1"><tr><td>15.00</td></tr></table>	15.00																			
15.00																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: WV	District: 00																					

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26908 Date of Disbursement																				
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<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>9</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	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		1	9		2	0	0	6													
City WASHINGTON	State DC	Zip Code 20036																				
Purpose of Disbursement Ermk:by ContribCk-Goldberg, Lois E		Amount of Each Disbursement this Period <table border="1"><tr><td>4.00</td></tr></table>	4.00																			
4.00																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: WV	District: 00																					

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE 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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26926 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by ContribCk-Benedict, Elizabeth Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26932 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by ContribCk-Kurtz, Corinne Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26953 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by ContribCk-Thaw, Arnold Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 679 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26963 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by ContribCk-Martineau, Linden P Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.26972 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by ContribCk-Wagner, James D Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.27000 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by ContribCk-Elliott, Roselyn Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.27047 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ernk:by ContribCk-Burnight, David R		Amount of Each Disbursement this Period <input type="text" value="150.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: WV District: 00	<input checked="" type="checkbox"/> General	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.27070 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ernk:by ContribCk-Rusby, Sheroo M		Amount of Each Disbursement this Period <input type="text" value="10.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: WV District: 00	<input checked="" type="checkbox"/> General	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.27078 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ernk:by ContribCk-Pollak, Patricia L		Amount of Each Disbursement this Period <input type="text" value="20.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: WV District: 00	<input checked="" type="checkbox"/> General	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.27083 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by ContribCk-Grewal, David Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.27091 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by ContribCk-Walsh, Mary H Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.27095 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by ContribCk-Rollin, Ida Mae Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.27099 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ermk:by ContribCk-Haig, Rose		Amount of Each Disbursement this Period <input type="text" value="25.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: WV District: 00		

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.27108 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ermk:by ContribCk-Struble, John R		Amount of Each Disbursement this Period <input type="text" value="2.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: WV District: 00		

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.27143 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ermk:by ContribCk-Goldthwait, David A		Amount of Each Disbursement this Period <input type="text" value="25.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: WV District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.27161 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ermk:by ContribCk-Lowry, John	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <input type="text" value="50.00"/>
State: WV District: 00	<b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.27203 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ermk:by ContribCk-Richards, Frederic M	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <input type="text" value="200.00"/>
State: WV District: 00	<b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.27223 Date of Disbursement
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement Ermk:by ContribCk-Tybout, Richard A	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <input type="text" value="50.00"/>
State: WV District: 00	<b>[MEMO ITEM]</b>	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<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)

PAGE 684 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.27245 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by ContribCk-Farber, Joyce R Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.27254 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 4.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by ContribCk-Winkler, Ronald S Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.27257 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by ContribCk-Wachob, William K Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		Transaction ID: SB23.27282 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 1300 CONNECTICUT AVENUE NW STE 600		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City WASHINGTON State DC Zip Code 20036		
Purpose of Disbursement Ermk:by ContribCk-Barnes, Robert F Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27374 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by CreditCard-Newman, Ezra T Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27375 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by CreditCard-Heinz, Jenny Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27549 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by CreditCard-Barnett, Octo Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.24665 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 1000.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Jencks, Christopher Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.24685 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Plonsey, Robert Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		<b>Transaction ID: SB23.24708</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Soffler, Judy W Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		<b>Transaction ID: SB23.24717</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Stout, Mildred B Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		<b>Transaction ID: SB23.24735</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Everts, Stockwell Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 688 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.24744 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Cohen, Miriam Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.24756 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6	
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 1500.00  <b>[MEMO ITEM]</b>	
City AMHERST State OH Zip Code 44001			
Purpose of Disbursement Ermk:by ContribCk-Villchur, Edgar Candidate Name			Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00			Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.24766 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6	
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>	
City AMHERST State OH Zip Code 44001			
Purpose of Disbursement Ermk:by ContribCk-Hayes, Robert Jones Candidate Name			Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00			Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.24772 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ernk:by ContribCk-Furstenberg, Edith H		<input type="text" value="200.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: OH District: 00		

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.24786 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ernk:by ContribCk-Gingher, Barbara J		<input type="text" value="20.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: OH District: 00		

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.24816 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ernk:by ContribCk-Dickey, Thomas W		<input type="text" value="25.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: OH District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.24838 Date of Disbursement																				
Mailing Address 2280 KRESGE DRIVE		<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>0</td><td>6</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		0	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		0	6		2	0	0	6													
City AMHERST	State OH	Zip Code 44001																				
Purpose of Disbursement Ermk:by ContribCk-Brogan, John A		Amount of Each Disbursement this Period																				
Candidate Name		<table border="1"><tr><td>50.00</td></tr></table>	50.00																			
50.00																						
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]																				
State: OH	District: 00																					

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.24848 Date of Disbursement																				
Mailing Address 2280 KRESGE DRIVE		<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>0</td><td>6</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		0	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		0	6		2	0	0	6													
City AMHERST	State OH	Zip Code 44001																				
Purpose of Disbursement Ermk:by ContribCk-Doty, Paul M		Amount of Each Disbursement this Period																				
Candidate Name		<table border="1"><tr><td>35.00</td></tr></table>	35.00																			
35.00																						
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]																				
State: OH	District: 00																					

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27396 Date of Disbursement																				
Mailing Address 2280 KRESGE DRIVE		<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>0</td><td>6</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		0	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		0	6		2	0	0	6													
City AMHERST	State OH	Zip Code 44001																				
Purpose of Disbursement Ermk:by CreditCard-Gardner, Sheryl		Amount of Each Disbursement this Period																				
Candidate Name		<table border="1"><tr><td>500.00</td></tr></table>	500.00																			
500.00																						
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]																				
State: OH	District: 00																					

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE 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 691 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
FRIENDS OF SHERROD BROWN

Mailing Address 2280 KRESGE DRIVE

City AMHERST State OH Zip Code 44001

Purpose of Disbursement  
Ernk:by CreditCard-Rittenberg, William  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: OH District: 00  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.27399  
Date of Disbursement

09 / 08 / 2006

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF SHERROD BROWN

Mailing Address 2280 KRESGE DRIVE

City AMHERST State OH Zip Code 44001

Purpose of Disbursement  
Ernk:by CreditCard-Nickerson, Lawrie  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: OH District: 00  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.27413  
Date of Disbursement

09 / 14 / 2006

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
FRIENDS OF SHERROD BROWN

Mailing Address 2280 KRESGE DRIVE

City AMHERST State OH Zip Code 44001

Purpose of Disbursement  
Ernk:by CreditCard-Schiffmann, Elliott  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: OH District: 00  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.27426  
Date of Disbursement

09 / 15 / 2006

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ▶

0.00

**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)

PAGE 692 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27441 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 200.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by CreditCard-Aiyer, Kamesh Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27454 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by CreditCard-James, Nancy Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27459 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by CreditCard-MacKenzie, David M Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 693 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26490 Date of Disbursement																					
Mailing Address 2280 KRESGE DRIVE		<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>9</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	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	9		2	0	0	6														
City AMHERST	State OH	Zip Code 44001	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-MacKay, Dorothy		Category/ Type	20.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																				
State: OH	District: 00																						

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26493 Date of Disbursement																					
Mailing Address 2280 KRESGE DRIVE		<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>9</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	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	9		2	0	0	6														
City AMHERST	State OH	Zip Code 44001	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Baldwin, Frank C		Category/ Type	100.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																				
State: OH	District: 00																						

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26500 Date of Disbursement																					
Mailing Address 2280 KRESGE DRIVE		<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>9</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	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	9		2	0	0	6														
City AMHERST	State OH	Zip Code 44001	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-White, Allyn B		Category/ Type	50.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																				
State: OH	District: 00																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26512 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 100.00
City AMHERST State OH Zip Code 44001	Purpose of Disbursement Ermk:by ContribCk-Block-Schwenk, Deborah Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26513 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 5.00
City AMHERST State OH Zip Code 44001	Purpose of Disbursement Ermk:by ContribCk-Brenneman, Mary Louise Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26515 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 1.00
City AMHERST State OH Zip Code 44001	Purpose of Disbursement Ermk:by ContribCk-Klein, Aline Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 695 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26520 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ermk:by ContribCk-Jones, Carolyn E.		<input type="text" value="10.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: OH District: 00		

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26532 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ermk:by ContribCk-Swift, Alice C		<input type="text" value="50.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: OH District: 00		

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26535 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ermk:by ContribCk-Foldy, Roma B.		<input type="text" value="250.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: OH District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<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)

PAGE 696 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26539 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 1.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Bell, Ann C Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26541 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Metzger, Bert L Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26551 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 1.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-McCoy, Tom Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 697 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26554 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ermk:by ContribCk-Creelman, James		<input type="text" value="100.00"/> Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: OH	District: 00	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26569 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ermk:by ContribCk-Mosgofian, Seth D		<input type="text" value="10.00"/> Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: OH	District: 00	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26576 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ermk:by ContribCk-Engelhaupt, Joan		<input type="text" value="10.00"/> Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: OH	District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<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)

PAGE 698 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

A. FRIENDS OF SHERROD BROWN

Full Name (Last, First, Middle Initial)  
Mailing Address 2280 KRESGE DRIVE

City AMHERST State OH Zip Code 44001

Purpose of Disbursement  
Ermk:by ContribCk-Oswain, Janet E  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: OH District: 00  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.26582  
Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]

B. FRIENDS OF SHERROD BROWN

Mailing Address 2280 KRESGE DRIVE

City AMHERST State OH Zip Code 44001

Purpose of Disbursement  
Ermk:by ContribCk-Alpert, Ralph  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: OH District: 00  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.26590  
Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

C. FRIENDS OF SHERROD BROWN

Mailing Address 2280 KRESGE DRIVE

City AMHERST State OH Zip Code 44001

Purpose of Disbursement  
Ermk:by ContribCk-Beale, Carol  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: OH District: 00  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.26595  
Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)

PAGE 699 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26597 Date of Disbursement																				
Mailing Address 2280 KRESGE DRIVE		<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>9</td><td></td><td>2</td><td>0</td><td>6</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	9		2	0	6	
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		1	9		2	0	6														
City AMHERST	State OH	Zip Code 44001																				
Purpose of Disbursement Ermk:by ContribCk-Bardeen, James M		Amount of Each Disbursement this Period <table border="1"><tr><td>50.00</td></tr></table>	50.00																			
50.00																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: OH	District: 00	[MEMO ITEM]																				

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26604 Date of Disbursement																				
Mailing Address 2280 KRESGE DRIVE		<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>9</td><td></td><td>2</td><td>0</td><td>6</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	9		2	0	6	
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		1	9		2	0	6														
City AMHERST	State OH	Zip Code 44001																				
Purpose of Disbursement Ermk:by ContribCk-Berkovitz, Leonard D		Amount of Each Disbursement this Period <table border="1"><tr><td>35.00</td></tr></table>	35.00																			
35.00																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: OH	District: 00	[MEMO ITEM]																				

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26605 Date of Disbursement																				
Mailing Address 2280 KRESGE DRIVE		<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>9</td><td></td><td>2</td><td>0</td><td>6</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	9		2	0	6	
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		1	9		2	0	6														
City AMHERST	State OH	Zip Code 44001																				
Purpose of Disbursement Ermk:by ContribCk-Baker, Marshall		Amount of Each Disbursement this Period <table border="1"><tr><td>50.00</td></tr></table>	50.00																			
50.00																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: OH	District: 00	[MEMO ITEM]																				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

# SCHEDULE 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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26629 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 50.00
City AMHERST State OH Zip Code 44001	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Carlock, Helen L		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26637 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 100.00
City AMHERST State OH Zip Code 44001	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Driscoll, Charles F		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26659 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 100.00
City AMHERST State OH Zip Code 44001	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Munnich, Kurt A		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26663 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 50.00
City AMHERST State OH Zip Code 44001	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Myers, R. Thomas		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26669 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 50.00
City AMHERST State OH Zip Code 44001	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Nielsen, John W		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26679 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 25.00
City AMHERST State OH Zip Code 44001	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Felix, Gretchen S		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26683 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ermk:by ContribCk-Flum, Louis		Amount of Each Disbursement this Period <input type="text" value="35.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 00	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26684 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ermk:by ContribCk-Franklin, Naomi C		Amount of Each Disbursement this Period <input type="text" value="400.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 00	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26699 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ermk:by ContribCk-Gerstenfeld, Sol L		Amount of Each Disbursement this Period <input type="text" value="10.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 00	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26708 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 100.00
City AMHERST State OH Zip Code 44001	Purpose of Disbursement Ermk:by ContribCk-Holdridge, Douglas W Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26714 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 25.00
City AMHERST State OH Zip Code 44001	Purpose of Disbursement Ermk:by ContribCk-Harris, Marion P Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26726 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 50.00
City AMHERST State OH Zip Code 44001	Purpose of Disbursement Ermk:by ContribCk-Jones, Bernadette B Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26733 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 1000.00
City AMHERST State OH Zip Code 44001	Purpose of Disbursement Ermk:by ContribCk-Jencks, Christopher Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26740 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 50.00
City AMHERST State OH Zip Code 44001	Purpose of Disbursement Ermk:by ContribCk-Johnson, Roger D Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26751 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 10.00
City AMHERST State OH Zip Code 44001	Purpose of Disbursement Ermk:by ContribCk-Katz, Ilene Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26753 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Kemble, Jean A Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26756 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 5.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Keck, Robert L Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26762 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 80.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Loescher, Aase A Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26774 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 200.00
City AMHERST State OH Zip Code 44001	Purpose of Disbursement Ermk:by ContribCk-Lamperti, John W Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26783 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 100.00
City AMHERST State OH Zip Code 44001	Purpose of Disbursement Ermk:by ContribCk-Meislin, Barbara J Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26787 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 50.00
City AMHERST State OH Zip Code 44001	Purpose of Disbursement Ermk:by ContribCk-Marshall, Dorothy Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26793 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ermk:by ContribCk-Nisly, Paul W		Amount of Each Disbursement this Period <input type="text" value="25.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: OH	District: 00	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26795 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ermk:by ContribCk-Oestreich, Alan E		Amount of Each Disbursement this Period <input type="text" value="17.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: OH	District: 00	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26807 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ermk:by ContribCk-Rodgers, Daniel T		Amount of Each Disbursement this Period <input type="text" value="200.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: OH	District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26812 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 50.00
City AMHERST State OH Zip Code 44001	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Riegel, Harry I		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26817 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 100.00
City AMHERST State OH Zip Code 44001	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Reed, Jack D		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26823 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 50.00
City AMHERST State OH Zip Code 44001	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Rogers, Lorraine K		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26831 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Rupel, William E Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26838 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Stavely, Elizabeth W Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26845 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Sullivan, Mary B Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26849 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ernk:by ContribCk-Sullivan, Michael J		<input type="text" value="3.00"/> Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: OH	District: 00	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26867 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ernk:by ContribCk-Weisberg, Joel		<input type="text" value="10.00"/> Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: OH	District: 00	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26871 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ernk:by ContribCk-Wittner, Lawrence S		<input type="text" value="25.00"/> Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: OH	District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26873 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ernk:by ContribCk-Wood, Margaret E		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="25.00"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: OH	District: 00	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26879 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ernk:by ContribCk-Wallerstein, Robert S		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="25.00"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: OH	District: 00	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26883 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ernk:by ContribCk-West, Wilma E		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="50.00"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: OH	District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
FRIENDS OF SHERROD BROWN

Mailing Address 2280 KRESGE DRIVE

City AMHERST State OH Zip Code 44001

Purpose of Disbursement  
Ermk:by ContribCk-Levine, Adam E

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: OH District: 00

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.26886

Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF SHERROD BROWN

Mailing Address 2280 KRESGE DRIVE

City AMHERST State OH Zip Code 44001

Purpose of Disbursement  
Ermk:by ContribCk-Kriegler, Bertha

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: OH District: 00

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.26887

Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

10.00

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
FRIENDS OF SHERROD BROWN

Mailing Address 2280 KRESGE DRIVE

City AMHERST State OH Zip Code 44001

Purpose of Disbursement  
Ermk:by ContribCk-Goldberg, Lois E

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: OH District: 00

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.26904

Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

4.00

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26922 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 100.00
City AMHERST State OH Zip Code 44001	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Benedict, Elizabeth Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26935 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 25.00
City AMHERST State OH Zip Code 44001	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Comandich, Rick Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26940 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 50.00
City AMHERST State OH Zip Code 44001	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-McPherson, Donald M Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26944 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Ballbach, Philip Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26947 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Brokstein, William B Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26949 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Thaw, Arnold Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26959 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 10.00
City AMHERST State OH Zip Code 44001	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Martineau, Linden P		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26978 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 50.00
City AMHERST State OH Zip Code 44001	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Kringel, Julia B		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26981 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 20.00
City AMHERST State OH Zip Code 44001	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Morrow, K John		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26982 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Makurath, Paul A Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26984 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 75.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Bushner, Rolland H Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26987 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Gray, Edward C Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.26991 Date of Disbursement																					
Mailing Address 2280 KRESGE DRIVE		<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>9</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	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	9		2	0	0	6														
City AMHERST	State OH	Zip Code 44001	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Anonymous, Anonymous		Category/ Type	20.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: OH	District: 00																						

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27003 Date of Disbursement																					
Mailing Address 2280 KRESGE DRIVE		<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>9</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	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	9		2	0	0	6														
City AMHERST	State OH	Zip Code 44001	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Sublett, Ramona Gale		Category/ Type	20.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: OH	District: 00																						

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27467 Date of Disbursement																					
Mailing Address 2280 KRESGE DRIVE		<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>2</td><td>0</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		2	0		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	0		2	0	0	6														
City AMHERST	State OH	Zip Code 44001	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by CreditCard-Coffin, Stephen A		Category/ Type	50.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: OH	District: 00																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27477 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ernk:by CreditCard-Axelrod, Steven G		Amount of Each Disbursement this Period <input type="text" value="25.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: OH	District: 00	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27048 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ernk:by ContribCk-Burnight, David R		Amount of Each Disbursement this Period <input type="text" value="100.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: OH	District: 00	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27050 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ernk:by ContribCk-Hicks, Robert A		Amount of Each Disbursement this Period <input type="text" value="20.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: OH	District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<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)

PAGE 719 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27056 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Michabofsky, Paul Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27063 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Lohmann, Jeanne A Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27075 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 250.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Warnke, Stephen Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27085 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ermk:by ContribCk-Grewal, David		Amount of Each Disbursement this Period <input type="text" value="100.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: OH District: 00		

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27096 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ermk:by ContribCk-Hakala, Edward		Amount of Each Disbursement this Period <input type="text" value="50.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: OH District: 00		

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27100 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ermk:by ContribCk-Haig, Rose		Amount of Each Disbursement this Period <input type="text" value="25.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: OH District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27104 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 200.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Conover, Pat Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27123 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Barsanti, Richard H Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27128 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Crooks, Betty L Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 722 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27132 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 35.00
City AMHERST State OH Zip Code 44001	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Carpenter, Dwight W		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 00		

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27151 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 35.00
City AMHERST State OH Zip Code 44001	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Kellogg, James N		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 00		

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27154 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 50.00
City AMHERST State OH Zip Code 44001	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Lowry, Ann		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 723 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27163 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Lowry, John Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27186 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Powell, Barry H Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27189 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Pokorny, Gene Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 724 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27193 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ermk:by ContribCk-Pine, Nancy		<input type="text" value="50.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: OH	District: 00	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27211 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ermk:by ContribCk-Segel, David P		<input type="text" value="50.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: OH	District: 00	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27224 Date of Disbursement
Mailing Address 2280 KRESGE DRIVE		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City AMHERST	State OH	Zip Code 44001
Purpose of Disbursement Ermk:by ContribCk-Tybout, Richard A		<input type="text" value="50.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: OH	District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27229 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Winsor, Ernest Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27246 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Farber, Joyce R Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27251 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Hall, Thomas L Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27259 Date of Disbursement																					
Mailing Address 2280 KRESGE DRIVE		<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>2</td><td>7</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		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	7		2	0	0	6														
City AMHERST	State OH	Zip Code 44001	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ernk:by ContribCk-Wachob, William K		Category/ Type	10.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought:	Disbursement For:																						
<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: OH	District: 00																						

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27270 Date of Disbursement																					
Mailing Address 2280 KRESGE DRIVE		<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>2</td><td>7</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		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	7		2	0	0	6														
City AMHERST	State OH	Zip Code 44001	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ernk:by ContribCk-Vanschaick, John H		Category/ Type	50.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought:	Disbursement For:																						
<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: OH	District: 00																						

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27280 Date of Disbursement																					
Mailing Address 2280 KRESGE DRIVE		<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>2</td><td>7</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		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	7		2	0	0	6														
City AMHERST	State OH	Zip Code 44001	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ernk:by ContribCk-Rosen, Charles		Category/ Type	500.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought:	Disbursement For:																						
<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: OH	District: 00																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27285 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Dean, Carol S Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27288 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Blake, Robert L Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27292 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 2280 KRESGE DRIVE		Amount of Each Disbursement this Period 40.00  <b>[MEMO ITEM]</b>
City AMHERST State OH Zip Code 44001		
Purpose of Disbursement Ermk:by ContribCk-Barry, Patricia Joan Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27494 Date of Disbursement																					
Mailing Address 2280 KRESGE DRIVE		<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>2</td><td>7</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		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	7		2	0	0	6														
City AMHERST	State OH	Zip Code 44001	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by CreditCard-Benson, John L		Category/ Type	50.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought:	Disbursement For: 2006																						
<input type="checkbox"/> House	<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General																					
<input checked="" type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼																						
<input type="checkbox"/> President																							
State: OH	District: 00																						

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF SHERROD BROWN</b>		Transaction ID: SB23.27498 Date of Disbursement																					
Mailing Address 2280 KRESGE DRIVE		<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>2</td><td>8</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		2	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	8		2	0	0	6														
City AMHERST	State OH	Zip Code 44001	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by CreditCard-Newman, Ezra T		Category/ Type	50.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought:	Disbursement For: 2006																						
<input type="checkbox"/> House	<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General																					
<input checked="" type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼																						
<input type="checkbox"/> President																							
State: OH	District: 00																						

Full Name (Last, First, Middle Initial) <b>C. JOHN SALAZAR FOR CONGRESS</b>		Transaction ID: SB23.27393 Date of Disbursement																					
Mailing Address P.O. Box 534		<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>0</td><td>5</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		0	5		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		0	5		2	0	0	6														
City Pueblo	State CO	Zip Code 81002	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by CreditCard-Klein, Marc		Category/ Type	25.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought:	Disbursement For: 2006																						
<input checked="" type="checkbox"/> House	<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General																					
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼																						
<input type="checkbox"/> President																							
State: CO	District: 03																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<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 729 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. JULIA CARSON FOR CONGRESS</b>		Transaction ID: SB23.26690 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 44088		Amount of Each Disbursement this Period 200.00  <b>[MEMO ITEM]</b>
City INDIANAPOLIS State IN Zip Code 46201		
Purpose of Disbursement Ermk:by ContribCk-Golodetz, Arnold Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 07	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. JULIA CARSON FOR CONGRESS</b>		Transaction ID: SB23.26716 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 44088		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City INDIANAPOLIS State IN Zip Code 46201		
Purpose of Disbursement Ermk:by ContribCk-Harris, Marion P Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 07	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. JULIA CARSON FOR CONGRESS</b>		Transaction ID: SB23.26769 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 44088		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City INDIANAPOLIS State IN Zip Code 46201		
Purpose of Disbursement Ermk:by ContribCk-Lesser, Gerson T Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 07	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 730 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. JULIA CARSON FOR CONGRESS</b>		Transaction ID: SB23.26826 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 44088		Amount of Each Disbursement this Period 25.00
City INDIANAPOLIS State IN Zip Code 46201	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Rogers, Lorraine K Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 07		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. JULIA CARSON FOR CONGRESS</b>		Transaction ID: SB23.26913 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 44088		Amount of Each Disbursement this Period 30.00
City INDIANAPOLIS State IN Zip Code 46201	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Fernbach, Harvey Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 07		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. JULIA CARSON FOR CONGRESS</b>		Transaction ID: SB23.27140 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2006
Mailing Address P.O. Box 44088		Amount of Each Disbursement this Period 15.00
City INDIANAPOLIS State IN Zip Code 46201	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Eger, William H Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 07		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. LAMPSON FOR CONGRESS</b>		Transaction ID: SB23.27377 Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2006
Mailing Address P.O. Box 58606		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Houston State TX Zip Code 77258		
Purpose of Disbursement Ermk:by CreditCard-Holt, Robert R Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 22	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. LAMPSON FOR CONGRESS</b>		Transaction ID: SB23.26651 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 58606		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City Houston State TX Zip Code 77258		
Purpose of Disbursement Ermk:by ContribCk-Eger, William H Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 22	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. LOIS MURPHY FOR CONGRESS</b>		Transaction ID: SB23.27369 Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2006
Mailing Address P.O. Box 312		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Narberth State PA Zip Code 19072		
Purpose of Disbursement Ermk:by CreditCard-Wejrowski, Monna L. Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

**A.** Full Name (Last, First, Middle Initial)  
LOIS MURPHY FOR CONGRESS

Mailing Address P.O. Box 312

City Narberth State PA Zip Code 19072

Purpose of Disbursement  
Ernk:by CreditCard-Grandinetti, Evelyn  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: PA District: 06  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.27376

Date of Disbursement

/   /

Amount of Each Disbursement this Period

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
LOIS MURPHY FOR CONGRESS

Mailing Address P.O. Box 312

City Narberth State PA Zip Code 19072

Purpose of Disbursement  
Ernk:by CreditCard-Barnett, Octo  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: PA District: 06  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.27562

Date of Disbursement

/   /

Amount of Each Disbursement this Period

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
LOIS MURPHY FOR CONGRESS

Mailing Address P.O. Box 312

City Narberth State PA Zip Code 19072

Purpose of Disbursement  
Ernk:by ContribCk-Melcher, Ulrich K  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: PA District: 06  
Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.24679

Date of Disbursement

/   /

Amount of Each Disbursement this Period

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A. LOIS MURPHY FOR CONGRESS</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 312 City Narberth State PA Zip Code 19072 Purpose of Disbursement Ermk:by CreditCard-James, Nancy Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB23.27407</b> Date of Disbursement 09 / 09 / 2006 Amount of Each Disbursement this Period 50.00 <b>[MEMO ITEM]</b>
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<b>B. LOIS MURPHY FOR CONGRESS</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 312 City Narberth State PA Zip Code 19072 Purpose of Disbursement Ermk:by CreditCard-Schiffmann, Elliott Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB23.27433</b> Date of Disbursement 09 / 15 / 2006 Amount of Each Disbursement this Period 50.00 <b>[MEMO ITEM]</b>
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<b>C. LOIS MURPHY FOR CONGRESS</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 312 City Narberth State PA Zip Code 19072 Purpose of Disbursement Ermk:by CreditCard-Bloomenthal, Martin Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB23.27463</b> Date of Disbursement 09 / 18 / 2006 Amount of Each Disbursement this Period 25.00 <b>[MEMO ITEM]</b>
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. LOIS MURPHY FOR CONGRESS</b>		Transaction ID: SB23.26641 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address P.O. Box 312		Amount of Each Disbursement this Period 120.00
City Narberth State PA Zip Code 19072	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Driscoll, Charles F		
Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 06		

Full Name (Last, First, Middle Initial) <b>B. LOIS MURPHY FOR CONGRESS</b>		Transaction ID: SB23.26650 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address P.O. Box 312		Amount of Each Disbursement this Period 10.00
City Narberth State PA Zip Code 19072	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Eger, William H		
Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 06		

Full Name (Last, First, Middle Initial) <b>C. LOIS MURPHY FOR CONGRESS</b>		Transaction ID: SB23.26692 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address P.O. Box 312		Amount of Each Disbursement this Period 200.00
City Narberth State PA Zip Code 19072	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Golodetz, Arnold		
Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 06		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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"/> 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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. LOIS MURPHY FOR CONGRESS</b>		Transaction ID: SB23.26720 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 312		Amount of Each Disbursement this Period 25.00
City Narberth State PA Zip Code 19072	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Harris, Marion P Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. LOIS MURPHY FOR CONGRESS</b>		Transaction ID: SB23.26770 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 312		Amount of Each Disbursement this Period 50.00
City Narberth State PA Zip Code 19072	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Lesser, Gerson T Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. LOIS MURPHY FOR CONGRESS</b>		Transaction ID: SB23.26815 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 312		Amount of Each Disbursement this Period 50.00
City Narberth State PA Zip Code 19072	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Riegel, Harry I Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. LOIS MURPHY FOR CONGRESS</b>		Transaction ID: SB23.26917 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 312		Amount of Each Disbursement this Period 30.00
City Narberth State PA Zip Code 19072	Purpose of Disbursement Ermk:by ContribCk-Fernbach, Harvey Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. LOIS MURPHY FOR CONGRESS</b>		Transaction ID: SB23.27474 Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2006
Mailing Address P.O. Box 312		Amount of Each Disbursement this Period 50.00
City Narberth State PA Zip Code 19072	Purpose of Disbursement Ermk:by CreditCard-Silver, Michael F Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. LOIS MURPHY FOR CONGRESS</b>		Transaction ID: SB23.27204 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2006
Mailing Address P.O. Box 312		Amount of Each Disbursement this Period 200.00
City Narberth State PA Zip Code 19072	Purpose of Disbursement Ermk:by ContribCk-Richards, Frederic M Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MADRID FOR CONGRESS</b>		Transaction ID: SB23.27371 Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2006
Mailing Address PO Box 25626		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Albuquerque State NM Zip Code 87125		
Purpose of Disbursement Ermk:by CreditCard-Wejrowski, Monna L.	Category/ Type	
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MADRID FOR CONGRESS</b>		Transaction ID: SB23.27378 Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2006
Mailing Address PO Box 25626		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Albuquerque State NM Zip Code 87125		
Purpose of Disbursement Ermk:by CreditCard-Grandinetti, Evelyn	Category/ Type	
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MADRID FOR CONGRESS</b>		Transaction ID: SB23.27408 Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2006
Mailing Address PO Box 25626		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Albuquerque State NM Zip Code 87125		
Purpose of Disbursement Ermk:by CreditCard-James, Nancy	Category/ Type	
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MADRID FOR CONGRESS</b>		Transaction ID: SB23.27434 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address PO Box 25626		Amount of Each Disbursement this Period 50.00
City Albuquerque State NM Zip Code 87125	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Schiffmann, Elliott		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MADRID FOR CONGRESS</b>		Transaction ID: SB23.27464 Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2006
Mailing Address PO Box 25626		Amount of Each Disbursement this Period 25.00
City Albuquerque State NM Zip Code 87125	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Bloomenthal, Martin		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MADRID FOR CONGRESS</b>		Transaction ID: SB23.26675 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO Box 25626		Amount of Each Disbursement this Period 10.00
City Albuquerque State NM Zip Code 87125	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Eger, William H		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MADRID FOR CONGRESS</b>		Transaction ID: SB23.26899 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO Box 25626		Amount of Each Disbursement this Period 1000.00  <b>[MEMO ITEM]</b>
City Albuquerque State NM Zip Code 87125		
Purpose of Disbursement Ermk:by ContribCk-Pretlow, Thomas G Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MADRID FOR CONGRESS</b>		Transaction ID: SB23.27475 Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2006
Mailing Address PO Box 25626		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Albuquerque State NM Zip Code 87125		
Purpose of Disbursement Ermk:by CreditCard-Silver, Michael F Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MASSA FOR CONGRESS</b>		Transaction ID: SB23.27560 Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2006
Mailing Address 59 EAST MARKET STREET SUITE 244		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City CORNING State NY Zip Code 14830		
Purpose of Disbursement Ermk:by CreditCard-Barnett, Octo Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MASSA FOR CONGRESS</b>		Transaction ID: SB23.27410 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 6
Mailing Address 59 EAST MARKET STREET SUITE 244		Amount of Each Disbursement this Period 50.00
City CORNING State NY Zip Code 14830	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Newman, Ezra T		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MASSA FOR CONGRESS</b>		Transaction ID: SB23.26497 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 59 EAST MARKET STREET SUITE 244		Amount of Each Disbursement this Period 250.00
City CORNING State NY Zip Code 14830	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Keefe, Diane		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MASSA FOR CONGRESS</b>		Transaction ID: SB23.26620 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 59 EAST MARKET STREET SUITE 244		Amount of Each Disbursement this Period 50.00
City CORNING State NY Zip Code 14830	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Crooks, Betty L		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MASSA FOR CONGRESS</b>		Transaction ID: SB23.26645 Date of Disbursement																					
Mailing Address 59 EAST MARKET STREET SUITE 244		<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>9</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	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	9		2	0	0	6														
City CORNING	State NY	Zip Code 14830	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Eger, William H		Category/ Type	10.00																				
Candidate Name																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																				
State: NY	District: 29																						

Full Name (Last, First, Middle Initial) <b>B. MASSA FOR CONGRESS</b>		Transaction ID: SB23.26798 Date of Disbursement																					
Mailing Address 59 EAST MARKET STREET SUITE 244		<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>9</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	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	9		2	0	0	6														
City CORNING	State NY	Zip Code 14830	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Oskamp, Stuart		Category/ Type	100.00																				
Candidate Name																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																				
State: NY	District: 29																						

Full Name (Last, First, Middle Initial) <b>C. MASSA FOR CONGRESS</b>		Transaction ID: SB23.26810 Date of Disbursement																					
Mailing Address 59 EAST MARKET STREET SUITE 244		<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>9</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	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	9		2	0	0	6														
City CORNING	State NY	Zip Code 14830	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Renkin, Eugene M		Category/ Type	50.00																				
Candidate Name																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																				
State: NY	District: 29																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MASSA FOR CONGRESS</b>		Transaction ID: SB23.26893 Date of Disbursement MM / DD / YYYY 09 / 19 / 2006
Mailing Address 59 EAST MARKET STREET SUITE 244		Amount of Each Disbursement this Period 1000.00
City CORNING State NY Zip Code 14830	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Pretlow, Thomas G		
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MASSA FOR CONGRESS</b>		Transaction ID: SB23.27114 Date of Disbursement MM / DD / YYYY 09 / 27 / 2006
Mailing Address 59 EAST MARKET STREET SUITE 244		Amount of Each Disbursement this Period 10.00
City CORNING State NY Zip Code 14830	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Albrecht, Kathryn		
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MATHESON FOR CONGRESS</b>		Transaction ID: SB23.26672 Date of Disbursement MM / DD / YYYY 09 / 19 / 2006
Mailing Address 677 South 200 West Suite A		Amount of Each Disbursement this Period 10.00
City Salt Lake City State UT Zip Code 84101	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Eger, William H		
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 02	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MCNERNEY FOR CONGRESS</b>		Transaction ID: SB23.24683 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 5429 Madison Avenue		Amount of Each Disbursement this Period 100.00
City Sacramento State CA Zip Code 95841	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Potter, Neal Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>B. MCNERNEY FOR CONGRESS</b>		Transaction ID: SB23.24718 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 5429 Madison Avenue		Amount of Each Disbursement this Period 200.00
City Sacramento State CA Zip Code 95841	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Shearer, Rees R Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>C. MCNERNEY FOR CONGRESS</b>		Transaction ID: SB23.24736 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 5429 Madison Avenue		Amount of Each Disbursement this Period 20.00
City Sacramento State CA Zip Code 95841	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Lipton, Millicent A Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MCNERNEY FOR CONGRESS</b>		Transaction ID: SB23.24806 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 5429 Madison Avenue		Amount of Each Disbursement this Period 25.00
City Sacramento State CA Zip Code 95841	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Mitchell, Glen H		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>B. MCNERNEY FOR CONGRESS</b>		Transaction ID: SB23.24844 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 5429 Madison Avenue		Amount of Each Disbursement this Period 35.00
City Sacramento State CA Zip Code 95841	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Craig, Alex		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>C. MCNERNEY FOR CONGRESS</b>		Transaction ID: SB23.26621 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 5429 Madison Avenue		Amount of Each Disbursement this Period 50.00
City Sacramento State CA Zip Code 95841	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Crooks, Betty L		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MCNERNEY FOR CONGRESS</b>		Transaction ID: SB23.26646 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 5429 Madison Avenue		Amount of Each Disbursement this Period 10.00
City Sacramento State CA Zip Code 95841	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Eger, William H		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	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) <b>B. MCNERNEY FOR CONGRESS</b>		Transaction ID: SB23.26706 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 5429 Madison Avenue		Amount of Each Disbursement this Period 100.00
City Sacramento State CA Zip Code 95841	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Hawkins, Bruce		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	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) <b>C. MCNERNEY FOR CONGRESS</b>		Transaction ID: SB23.26801 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 5429 Madison Avenue		Amount of Each Disbursement this Period 100.00
City Sacramento State CA Zip Code 95841	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Oskamp, Stuart		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MCNERNEY FOR CONGRESS</b>		Transaction ID: SB23.26825 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 5429 Madison Avenue		Amount of Each Disbursement this Period 50.00
City Sacramento State CA Zip Code 95841	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Rogers, Lorraine K		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>B. MCNERNEY FOR CONGRESS</b>		Transaction ID: SB23.27115 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2006
Mailing Address 5429 Madison Avenue		Amount of Each Disbursement this Period 10.00
City Sacramento State CA Zip Code 95841	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Albrecht, Kathryn		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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) <b>C. MCNERNEY FOR CONGRESS</b>		Transaction ID: SB23.27167 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2006
Mailing Address 5429 Madison Avenue		Amount of Each Disbursement this Period 50.00
City Sacramento State CA Zip Code 95841	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Lecuyer, Jean		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27368 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 6
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087		
Purpose of Disbursement Ermk:by CreditCard-Litt, Michael Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27370 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 6
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087		
Purpose of Disbursement Ermk:by CreditCard-Wejrowski, Monna L. Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27548 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 0 6
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087		
Purpose of Disbursement Ermk:by CreditCard-Newman, Ezra T Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27552 Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087		
Purpose of Disbursement Ermk:by CreditCard-Holt, Robert R Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27553 Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087		
Purpose of Disbursement Ermk:by CreditCard-Barnett, Octo Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27390 Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087		
Purpose of Disbursement Ermk:by CreditCard-Schreiber, Eugene H Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27391 Date of Disbursement 09 / 05 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 30.00  <b>[MEMO ITEM]</b>
City Union City	State NJ	
Zip Code 07087		
Purpose of Disbursement Ermk:by CreditCard-Klein, Marc Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ District: 13		

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.24690 Date of Disbursement 09 / 06 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 1000.00  <b>[MEMO ITEM]</b>
City Union City	State NJ	
Zip Code 07087		
Purpose of Disbursement Ermk:by ContribCk-Revelle, Eleanor Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ District: 13		

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.24710 Date of Disbursement 09 / 06 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City Union City	State NJ	
Zip Code 07087		
Purpose of Disbursement Ermk:by ContribCk-Soffler, Judy W Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ District: 13		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.24769 Date of Disbursement 09 / 06 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087		
Purpose of Disbursement Ermk:by ContribCk-Gingher, Barbara J Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.24771 Date of Disbursement 09 / 06 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087		
Purpose of Disbursement Ermk:by ContribCk-Goodwin, Richard Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.24775 Date of Disbursement 09 / 06 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 200.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087		
Purpose of Disbursement Ermk:by ContribCk-Furstenberg, Edith H Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.24797 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 10.00
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Rusby, Sheroo M Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.24817 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 25.00
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Fisher, Robert A Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27398 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 300.00
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by CreditCard-Gardner, Sheryl Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27400 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6	
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>	
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by CreditCard-Rittenberg, William Candidate Name  Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Category/ Type			

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27405 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 9 / 2 0 0 6	
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 200.00  <b>[MEMO ITEM]</b>	
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by CreditCard-Bernstein, Aron Candidate Name  Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Category/ Type			

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27406 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 9 / 2 0 0 6	
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 75.00  <b>[MEMO ITEM]</b>	
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by CreditCard-James, Nancy Candidate Name  Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Category/ Type			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27416 Date of Disbursement 09 / 14 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087	Category/ Type	
Purpose of Disbursement Ermk:by CreditCard-Nickerson, Lawrie Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27451 Date of Disbursement 09 / 16 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 200.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087	Category/ Type	
Purpose of Disbursement Ermk:by CreditCard-Aiyer, Kamesh Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26476 Date of Disbursement 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 300.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087	Category/ Type	
Purpose of Disbursement Ermk:by ContribCk-Plaut, Johanna M Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26481 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 10.00
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Stone, Pablo Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26485 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 10.00
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Dubinet, Leah S Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26495 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 100.00
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Baldwin, Frank C Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26507 Date of Disbursement 09 / 19 / 2006	
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 25.00	
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Sato, Ralph I Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26523 Date of Disbursement 09 / 19 / 2006	
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 10.00	
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Jones, Carolyn E. Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26538 Date of Disbursement 09 / 19 / 2006	
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 100.00	
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Foldy, Roma B. Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26544 Date of Disbursement 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Metzger, Bert L Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26557 Date of Disbursement 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Creelman, James Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26572 Date of Disbursement 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Mosgofian, Seth D Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26578 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 10.00
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Engelhaupt, Joan Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26588 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 100.00
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Anderson, Clifford E Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26596 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 100.00
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Bunn, George Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26600 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>	
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Bardeen, James M Candidate Name  Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Category/Type			

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26608 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>	
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Baker, Marshall Candidate Name  Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Category/Type			

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26613 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>	
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Brooks, Stephen A Candidate Name  Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Category/Type			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26623 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087		
Purpose of Disbursement Ermk:by ContribCk-Crooks, Betty L Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26625 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087		
Purpose of Disbursement Ermk:by ContribCk-Crooks, Betty L Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26631 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087		
Purpose of Disbursement Ermk:by ContribCk-Colby, Richard H Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26656 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>	
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Millar, Florence Kate Candidate Name  Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District: 13		
Category/Type			
Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>			

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26664 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>	
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Marshall, Strother B Candidate Name  Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District: 13		
Category/Type			
Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>			

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26687 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 200.00  <b>[MEMO ITEM]</b>	
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Golodetz, Arnold Candidate Name  Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District: 13		
Category/Type			
Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26702 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Gerstenfeld, Sol L Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26719 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Harris, Marion P Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26729 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Jones, Bernadette B Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A. MENENDEZ FOR SENATE</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 848 City Union City State NJ Zip Code 07087 Purpose of Disbursement Ermk:by ContribCk-Jencks, Christopher Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB23.26735</b> Date of Disbursement 09 / 19 / 2006 Amount of Each Disbursement this Period 1000.00 <b>[MEMO ITEM]</b>
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<b>B. MENENDEZ FOR SENATE</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 848 City Union City State NJ Zip Code 07087 Purpose of Disbursement Ermk:by ContribCk-Jindrich, Denise Lobet Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB23.26736</b> Date of Disbursement 09 / 19 / 2006 Amount of Each Disbursement this Period 100.00 <b>[MEMO ITEM]</b>
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<b>C. MENENDEZ FOR SENATE</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 848 City Union City State NJ Zip Code 07087 Purpose of Disbursement Ermk:by ContribCk-Johnson, Roger D Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB23.26743</b> Date of Disbursement 09 / 19 / 2006 Amount of Each Disbursement this Period 50.00 <b>[MEMO ITEM]</b>
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26765 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 80.00  <b>[MEMO ITEM]</b>
City Union City	State NJ	
Zip Code 07087		
Purpose of Disbursement Ermk:by ContribCk-Loescher, Aase A Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ District: 13		

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26780 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City Union City	State NJ	
Zip Code 07087		
Purpose of Disbursement Ermk:by ContribCk-Ludwig, Robert A Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ District: 13		

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26785 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Union City	State NJ	
Zip Code 07087		
Purpose of Disbursement Ermk:by ContribCk-Meislin, Barbara J Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ District: 13		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26790 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Nielsen, John W Candidate Name  Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Category/ Type		

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26809 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 200.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Rodgers, Daniel T Candidate Name  Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Category/ Type		

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26814 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Riegel, Harry I Candidate Name  Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Category/ Type		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26820 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>	
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Reed, Jack D Candidate Name  Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Category/Type			
[Empty Box]			

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26827 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>	
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Rogers, Lorraine K Candidate Name  Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Category/Type			
[Empty Box]			

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26834 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>	
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Rupel, William E Candidate Name  Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Category/Type			
[Empty Box]			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26840 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 50.00
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Schmeidler, Gertrude Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26850 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 3.00
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Sullivan, Michael J Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26863 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 15.00
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Wright, George C Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26869 Date of Disbursement 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087		
Purpose of Disbursement Ermk:by ContribCk-Weisberg, Joel Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26880 Date of Disbursement 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087		
Purpose of Disbursement Ermk:by ContribCk-Wallerstein, Robert S Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26885 Date of Disbursement 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087		
Purpose of Disbursement Ermk:by ContribCk-Shor, A. Louis Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A. MENENDEZ FOR SENATE</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 848 City Union City State NJ Zip Code 07087 Purpose of Disbursement Ermk:by ContribCk-Kriegler, Bertha Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.26890 Date of Disbursement 09 / 19 / 2006 Amount of Each Disbursement this Period 10.00 [MEMO ITEM]
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<b>B. MENENDEZ FOR SENATE</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 848 City Union City State NJ Zip Code 07087 Purpose of Disbursement Ermk:by ContribCk-Pretlow, Thomas G Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.26897 Date of Disbursement 09 / 19 / 2006 Amount of Each Disbursement this Period 1000.00 [MEMO ITEM]
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<b>C. MENENDEZ FOR SENATE</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 848 City Union City State NJ Zip Code 07087 Purpose of Disbursement Ermk:by ContribCk-Pretlow, Thomas G Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.26900 Date of Disbursement 09 / 19 / 2006 Amount of Each Disbursement this Period 2000.00 [MEMO ITEM]
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26907 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 4.00
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Goldberg, Lois E Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26910 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 25.00
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Condoyannis, George E Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26916 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 40.00
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Fernbach, Harvey Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26925 Date of Disbursement 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Benedict, Elizabeth Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26931 Date of Disbursement 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 5.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Kurtz, Corinne Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26938 Date of Disbursement 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Comandich, Rick Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26941 Date of Disbursement 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Greene, Richard Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/Type

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26952 Date of Disbursement 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Thaw, Arnold Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/Type

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26962 Date of Disbursement 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Martineau, Linden P Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26971 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087		
Purpose of Disbursement Ermk:by ContribCk-Wagner, James D Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26974 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 1.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087		
Purpose of Disbursement Ermk:by ContribCk-Diamond, E Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.26992 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087		
Purpose of Disbursement Ermk:by ContribCk-Anonymous, Anonymous Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27006 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>	
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Sublett, Ramona Gale Candidate Name  Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District: 13		
Category/Type			
Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>			

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27471 Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2006	
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>	
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by CreditCard-Coffin, Stephen A Candidate Name  Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District: 13		
Category/Type			
Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>			

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27483 Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2006	
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>	
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by CreditCard-Calkins, Peggy Candidate Name  Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District: 13		
Category/Type			
Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27487 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 0 6
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 1000.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087	Category/ Type	
Purpose of Disbursement Ermk:by CreditCard-Obermayer, Arthur Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27491 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 200.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087	Category/ Type	
Purpose of Disbursement Ermk:by CreditCard-Isaacs, John Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27055 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087	Category/ Type	
Purpose of Disbursement Ermk:by ContribCk-Michabofsky, Paul Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27069 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 10.00
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Rusby, Sheroo M Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27080 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 1.00
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Klein, Aline Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27090 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 25.00
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Walsh, Mary H Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27122 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087		
Purpose of Disbursement Ermk:by ContribCk-Barsanti, Richard H Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27131 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087		
Purpose of Disbursement Ermk:by ContribCk-Carpenter, Dwight W Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27160 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087		
Purpose of Disbursement Ermk:by ContribCk-Lowry, John Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27171 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087	Category/ Type	
Purpose of Disbursement Ermk:by ContribCk-Leggat, Thomas E Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27174 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087	Category/ Type	
Purpose of Disbursement Ermk:by ContribCk-Metzger, Albert Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27196 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087	Category/ Type	
Purpose of Disbursement Ermk:by ContribCk-Quinlan, Guy C Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27201 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 200.00  <b>[MEMO ITEM]</b>
City Union City	State NJ	
Zip Code 07087		
Purpose of Disbursement Ermk:by ContribCk-Richards, Frederic M Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ District: 13		

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27228 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Union City	State NJ	
Zip Code 07087		
Purpose of Disbursement Ermk:by ContribCk-Winsor, Ernest Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ District: 13		

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27244 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Union City	State NJ	
Zip Code 07087		
Purpose of Disbursement Ermk:by ContribCk-Farber, Joyce R Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ District: 13		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27256 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 10.00
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Wachob, William K Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27265 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 25.00
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Tommaso, Margaret Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27269 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 100.00
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Vanschaick, John H Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27276 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 500.00
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Rosen, Charles Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27287 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 100.00
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Blake, Robert L Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27290 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 250.00
City Union City State NJ Zip Code 07087	Purpose of Disbursement Ermk:by ContribCk-Jervis, Kathe Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27295 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087		
Purpose of Disbursement Ermk:by ContribCk-Zweibel, Ellen Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Transaction ID: SB23.27493 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Union City State NJ Zip Code 07087		
Purpose of Disbursement Ermk:by CreditCard-Benson, John L Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27550 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by CreditCard-Holt, Robert R Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27551 Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by CreditCard-Barnett, Octo		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27382 Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by CreditCard-Schreiber, Eugene H		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27383 Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 150.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by CreditCard-Galin, David		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27384 Date of Disbursement 09 / 05 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>	
City BIG SANDY	State MT		Zip Code 59520
Purpose of Disbursement Ermk:by CreditCard-Kerridge, John F			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: MT District: 00	

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27385 Date of Disbursement 09 / 05 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 30.00  <b>[MEMO ITEM]</b>	
City BIG SANDY	State MT		Zip Code 59520
Purpose of Disbursement Ermk:by CreditCard-Jainchill, John			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: MT District: 00	

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27386 Date of Disbursement 09 / 05 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>	
City BIG SANDY	State MT		Zip Code 59520
Purpose of Disbursement Ermk:by CreditCard-Blacklow, Laura A.			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: MT District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27387 Date of Disbursement 09 / 05 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 20.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by CreditCard-Blacklow, Laura A.		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27388 Date of Disbursement 09 / 05 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by CreditCard-Lugovoy, Julius		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27389 Date of Disbursement 09 / 05 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 35.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by CreditCard-Fautz, Theodore		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24663 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 40.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Heller, Leon		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24666 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 1000.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Jencks, Christopher		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24674 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Lindsay, James E		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24676 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Moore, Gertrude B Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24684 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Potter, Neal Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24691 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 1000.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Revelle, Eleanor Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24694 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 5.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Roper, Peter G Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24705 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Skinner, John R Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24711 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Soffler, Judy W Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24723 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City BIG SANDY	State MT	
Zip Code 59520	Category/ Type	
Purpose of Disbursement Ermk:by ContribCk-Wellman, James M Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24725 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City BIG SANDY	State MT	
Zip Code 59520	Category/ Type	
Purpose of Disbursement Ermk:by ContribCk-Wittner, Lawrence S Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24728 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City BIG SANDY	State MT	
Zip Code 59520	Category/ Type	
Purpose of Disbursement Ermk:by ContribCk-Yasuhara, Ann Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24730 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Goebel, Melvin D Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24734 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Kanarek, Stanley Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24737 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Geiselhart, Maria A Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24739 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 200.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Wolfenstein, Lincoln Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24746 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Cohen, Miriam Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24759 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Bethe, Rose S Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24765 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Efner, Daniel E Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24770 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 15.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Rully, Donald J Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24776 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Furstenberg, Edith H Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24791 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 30.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Collins, David		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24793 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 5.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Persans, Walter H		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24798 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 10.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Rusby, Sheroo M		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24800 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Macomber, Richard W		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24812 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Miller, Calvin F		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24813 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 25.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Gould, Mark		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24818 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 15.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Zes, Tikey		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24821 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 20.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Bootz, Margaret		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24824 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 25.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Rincon, Pilar Maria		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24830 Date of Disbursement 09 / 06 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Ballou, Nathan E		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24831 Date of Disbursement 09 / 06 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Knecht, Dorothy F		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24832 Date of Disbursement 09 / 06 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 35.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Aisenberg, Alan C		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24834 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 35.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Anderson, Clifford E		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24836 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 200.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Anderson, Stuart H		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24839 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 40.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Brogan, John A		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24841 Date of Disbursement 09 / 06 / 2006
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Barsanti, Richard H		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24843 Date of Disbursement 09 / 06 / 2006
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 15.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Boone, Vera		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24846 Date of Disbursement 09 / 06 / 2006
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Dettinger, Glenn W		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.24851 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 20.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Fay, Betty Winton		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27397 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 200.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by CreditCard-Gardner, Sheryl		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27403 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 9 / 2 0 0 6	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 200.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by CreditCard-Bernstein, Aron		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27404 Date of Disbursement 09 / 09 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 75.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by CreditCard-James, Nancy		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27409 Date of Disbursement 09 / 11 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 500.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by CreditCard-Evans, David V		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27414 Date of Disbursement 09 / 14 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by CreditCard-Nickerson, Lawrie		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 800 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27415 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by CreditCard-Graber, Betty Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27442 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 200.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by CreditCard-Aiyer, Kamesh Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26475 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 300.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Plaut, Johanna M Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26494 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City BIG SANDY	State MT	
Zip Code 59520	Category/ Type	
Purpose of Disbursement Ermk:by ContribCk-Baldwin, Frank C Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26498 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 150.00  <b>[MEMO ITEM]</b>
City BIG SANDY	State MT	
Zip Code 59520	Category/ Type	
Purpose of Disbursement Ermk:by ContribCk-Keefe, Diane Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26510 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City BIG SANDY	State MT	
Zip Code 59520	Category/ Type	
Purpose of Disbursement Ermk:by ContribCk-Sodowick, George Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26521 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>	
City BIG SANDY	State MT		Zip Code 59520
Purpose of Disbursement Ermk:by ContribCk-Jones, Carolyn E.			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26536 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>	
City BIG SANDY	State MT		Zip Code 59520
Purpose of Disbursement Ermk:by ContribCk-Foldy, Roma B.			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26542 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>	
City BIG SANDY	State MT		Zip Code 59520
Purpose of Disbursement Ermk:by ContribCk-Metzger, Bert L			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26550 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Fleming, Lis L Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26555 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Creelman, James Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26566 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Norton, Libby Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26570 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 10.00
City BIG SANDY State MT Zip Code 59520	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Mosgofian, Seth D		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26583 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 20.00
City BIG SANDY State MT Zip Code 59520	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Oswain, Janet E		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26586 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 15.00
City BIG SANDY State MT Zip Code 59520	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Johnson, Erik		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26591 Date of Disbursement 09 / 19 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 200.00  <b>[MEMO ITEM]</b>	
City BIG SANDY	State MT		Zip Code 59520
Purpose of Disbursement Ermk:by ContribCk-Alpert, Ralph			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26594 Date of Disbursement 09 / 19 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>	
City BIG SANDY	State MT		Zip Code 59520
Purpose of Disbursement Ermk:by ContribCk-Adler, Susan S			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26598 Date of Disbursement 09 / 19 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>	
City BIG SANDY	State MT		Zip Code 59520
Purpose of Disbursement Ermk:by ContribCk-Bardeen, James M			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26602 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Brooks, Katherine Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26606 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Baker, Marshall Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26612 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Brooks, Stephen A Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26616 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 25.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Benninger, Sheila R		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26638 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Driscoll, Charles F		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26643 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 27.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Donald, Robert W		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26644 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City BIG SANDY	State MT	
Zip Code 59520	Purpose of Disbursement Ermk:by ContribCk-Eilbott, Peter Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26655 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City BIG SANDY	State MT	
Zip Code 59520	Purpose of Disbursement Ermk:by ContribCk-Millar, Florence Kate Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26658 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 30.00  <b>[MEMO ITEM]</b>
City BIG SANDY	State MT	
Zip Code 59520	Purpose of Disbursement Ermk:by ContribCk-Meral, Gerald H Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26660 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Munnich, Kurt A Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26662 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Meisalden, Noble J Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26680 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Felix, Gretchen S Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26681 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Felix, Gretchen S Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26685 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 300.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Franklin, Naomi C Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26689 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 200.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Golodetz, Arnold Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26696 Date of Disbursement 09 / 19 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Garner, John B		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26700 Date of Disbursement 09 / 19 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 10.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Gerstenfeld, Sol L		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26715 Date of Disbursement 09 / 19 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Harris, Marion P		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26724 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Hixson, William B		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26727 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Jones, Bernadette B		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26734 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 1000.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Jencks, Christopher		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26741 Date of Disbursement 09 / 19 / 2006
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City BIG SANDY	State MT	
Zip Code 59520	Purpose of Disbursement Ermk:by ContribCk-Johnson, Roger D	
Candidate Name Ermk:by ContribCk-Johnson, Roger D	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26748 Date of Disbursement 09 / 19 / 2006
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City BIG SANDY	State MT	
Zip Code 59520	Purpose of Disbursement Ermk:by ContribCk-Kaplan, Gloria S	
Candidate Name Ermk:by ContribCk-Kaplan, Gloria S	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26759 Date of Disbursement 09 / 19 / 2006
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City BIG SANDY	State MT	
Zip Code 59520	Purpose of Disbursement Ermk:by ContribCk-Kroot, Tina	
Candidate Name Ermk:by ContribCk-Kroot, Tina	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26763 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 80.00  <b>[MEMO ITEM]</b>
City BIG SANDY	State MT	
Zip Code 59520	Category/ Type	
Purpose of Disbursement Ermk:by ContribCk-Loescher, Aase A Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26771 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City BIG SANDY	State MT	
Zip Code 59520	Category/ Type	
Purpose of Disbursement Ermk:by ContribCk-Levy, John L Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26773 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City BIG SANDY	State MT	
Zip Code 59520	Category/ Type	
Purpose of Disbursement Ermk:by ContribCk-Langland, James T Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26777 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Liberman, Robert Paul Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26778 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 35.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Ludwig, Robert A Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26782 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Laties, Victor G Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26788 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Nielsen, John W		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26794 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 150.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Neff, Ruth H		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26800 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Oskamp, Stuart		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 817 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26804 Date of Disbursement 09 / 19 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>	
City BIG SANDY	State MT		Zip Code 59520
Purpose of Disbursement Ermk:by ContribCk-Pyle, James L			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26805 Date of Disbursement 09 / 19 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 200.00  <b>[MEMO ITEM]</b>	
City BIG SANDY	State MT		Zip Code 59520
Purpose of Disbursement Ermk:by ContribCk-Quinn, Daniel j			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26808 Date of Disbursement 09 / 19 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 200.00  <b>[MEMO ITEM]</b>	
City BIG SANDY	State MT		Zip Code 59520
Purpose of Disbursement Ermk:by ContribCk-Rodgers, Daniel T			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26813 Date of Disbursement 09 / 19 / 2006
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City BIG SANDY	State MT	
Zip Code 59520	Category/ Type	
Purpose of Disbursement Ermk:by ContribCk-Riegel, Harry I Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26818 Date of Disbursement 09 / 19 / 2006
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City BIG SANDY	State MT	
Zip Code 59520	Category/ Type	
Purpose of Disbursement Ermk:by ContribCk-Reed, Jack D Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26824 Date of Disbursement 09 / 19 / 2006
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City BIG SANDY	State MT	
Zip Code 59520	Category/ Type	
Purpose of Disbursement Ermk:by ContribCk-Rogers, Lorraine K Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26832 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Rupel, William E Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26843 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Sartori, Leo Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26853 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Sternman, Mark S Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26854 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00
City BIG SANDY State MT Zip Code 59520	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Salant, Priscilla Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26856 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00
City BIG SANDY State MT Zip Code 59520	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Sidel, Ruth Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26866 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 25.00
City BIG SANDY State MT Zip Code 59520	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Weaver, John S Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26876 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 35.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Weingart, Mary Brizius		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26888 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 15.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Kriegler, Bertha		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26894 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 1000.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Pretlow, Thomas G		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26905 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 5.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Goldberg, Lois E		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26919 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Roadcap, Robert N		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26923 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Benedict, Elizabeth		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A. MONTANANS FOR TESTER</b> Full Name (Last, First, Middle Initial) MONTANANS FOR TESTER Mailing Address PO BOX 1248 City BIG SANDY State MT Zip Code 59520 Purpose of Disbursement Ermk:by ContribCk-Kurtz, Corinne Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB23.26929</b> Date of Disbursement 09 / 19 / 2006 Amount of Each Disbursement this Period 15.00 <b>[MEMO ITEM]</b>
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<b>B. MONTANANS FOR TESTER</b> Full Name (Last, First, Middle Initial) MONTANANS FOR TESTER Mailing Address PO BOX 1248 City BIG SANDY State MT Zip Code 59520 Purpose of Disbursement Ermk:by ContribCk-Fought, Mary Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB23.26934</b> Date of Disbursement 09 / 19 / 2006 Amount of Each Disbursement this Period 10.00 <b>[MEMO ITEM]</b>
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<b>C. MONTANANS FOR TESTER</b> Full Name (Last, First, Middle Initial) MONTANANS FOR TESTER Mailing Address PO BOX 1248 City BIG SANDY State MT Zip Code 59520 Purpose of Disbursement Ermk:by ContribCk-Comandich, Rick Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB23.26936</b> Date of Disbursement 09 / 19 / 2006 Amount of Each Disbursement this Period 25.00 <b>[MEMO ITEM]</b>
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26945 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Ballbach, Philip		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26950 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 20.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Thaw, Arnold		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26955 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 35.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Pelech, Ronald A		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26956 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Albrecht, Kathryn Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26960 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Martineau, Linden P Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26966 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Gallant, Steve Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26975 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>	
City BIG SANDY	State MT		Zip Code 59520
Purpose of Disbursement Ermk:by ContribCk-Engelhaupt, Jean			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26979 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>	
City BIG SANDY	State MT		Zip Code 59520
Purpose of Disbursement Ermk:by ContribCk-Brown, Barbara L			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26983 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>	
City BIG SANDY	State MT		Zip Code 59520
Purpose of Disbursement Ermk:by ContribCk-Makurath, Paul A			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26993 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 250.00
City BIG SANDY State MT Zip Code 59520	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Walsh, Roger N Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26995 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 40.00
City BIG SANDY State MT Zip Code 59520	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Black, Linda C Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.26996 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 20.00
City BIG SANDY State MT Zip Code 59520	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Annoymous, Annoymous Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27004 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 20.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Sublett, Ramona Gale		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27008 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 35.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Bradshaw, John S		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27468 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00
City BIG SANDY	State MT	
Zip Code 59520		[MEMO ITEM]
Purpose of Disbursement Ermk:by CreditCard-Coffin, Stephen A		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27469 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 6	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by CreditCard-Silver, Michael F		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27470 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 6	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 35.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by CreditCard-Bratt, Jeremy D.		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27482 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 3 / 2 0 0 6	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by CreditCard-Calkins, Peggy		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27486 Date of Disbursement 09 / 24 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>	
City BIG SANDY	State MT		Zip Code 59520
Purpose of Disbursement Ermk:by CreditCard-Hellmuth, William F			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: MT District: 00	

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27044 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>	
City BIG SANDY	State MT		Zip Code 59520
Purpose of Disbursement Ermk:by ContribCk-Yale, Vivian			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: MT District: 00	

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27057 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>	
City BIG SANDY	State MT		Zip Code 59520
Purpose of Disbursement Ermk:by ContribCk-Michabofsky, Paul			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: MT District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27064 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City BIG SANDY	State MT	
Zip Code 59520	Purpose of Disbursement Ermk:by ContribCk-Lohmann, Jeanne A	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27072 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City BIG SANDY	State MT	
Zip Code 59520	Purpose of Disbursement Ermk:by ContribCk-Rusby, Sheroo M	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27086 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City BIG SANDY	State MT	
Zip Code 59520	Purpose of Disbursement Ermk:by ContribCk-Grewal, David	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27092 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>	
City BIG SANDY	State MT		Zip Code 59520
Purpose of Disbursement Ermk:by ContribCk-Walsh, Mary H			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: MT District: 00	

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27125 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 15.00  <b>[MEMO ITEM]</b>	
City BIG SANDY	State MT		Zip Code 59520
Purpose of Disbursement Ermk:by ContribCk-Boone, Vera			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: MT District: 00	

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27164 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>	
City BIG SANDY	State MT		Zip Code 59520
Purpose of Disbursement Ermk:by ContribCk-Lowry, John			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: MT District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27187 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Powell, Barry H		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27190 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Pokorny, Gene		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27194 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00	
City BIG SANDY	State MT	Zip Code 59520	[MEMO ITEM]
Purpose of Disbursement Ermk:by ContribCk-Pine, Nancy		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MT District: 00			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27212 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00
City BIG SANDY State MT Zip Code 59520	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Segel, David P Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27234 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 100.00
City BIG SANDY State MT Zip Code 59520	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Zakin, Jacques L Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27247 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 50.00
City BIG SANDY State MT Zip Code 59520	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Farber, Joyce R Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A. MONTANANS FOR TESTER</b> Full Name (Last, First, Middle Initial) MONTANANS FOR TESTER Mailing Address PO BOX 1248 City BIG SANDY State MT Zip Code 59520 Purpose of Disbursement Ermk:by ContribCk-Wachob, William K Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.27260 Date of Disbursement 09 / 27 / 2006 Amount of Each Disbursement this Period 10.00 [MEMO ITEM]
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<b>B. MONTANANS FOR TESTER</b> Full Name (Last, First, Middle Initial) MONTANANS FOR TESTER Mailing Address PO BOX 1248 City BIG SANDY State MT Zip Code 59520 Purpose of Disbursement Ermk:by ContribCk-Rosen, Charles Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.27281 Date of Disbursement 09 / 27 / 2006 Amount of Each Disbursement this Period 500.00 [MEMO ITEM]
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<b>C. MONTANANS FOR TESTER</b> Full Name (Last, First, Middle Initial) MONTANANS FOR TESTER Mailing Address PO BOX 1248 City BIG SANDY State MT Zip Code 59520 Purpose of Disbursement Ermk:by ContribCk-Blake, Robert L Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.27289 Date of Disbursement 09 / 27 / 2006 Amount of Each Disbursement this Period 100.00 [MEMO ITEM]
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27291 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 250.00  <b>[MEMO ITEM]</b>
City BIG SANDY State MT Zip Code 59520		
Purpose of Disbursement Ermk:by ContribCk-Jervis, Kathe Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MONTANANS FOR TESTER</b>		Transaction ID: SB23.27296 Date of Disbursement 09 / 27 / 2006	
Mailing Address PO BOX 1248		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>	
City BIG SANDY State MT Zip Code 59520			
Purpose of Disbursement Ermk:by ContribCk-Zweibel, Ellen Candidate Name			Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00			Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.24678 Date of Disbursement 09 / 06 / 2006	
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>	
City MERIDEN State CT Zip Code 06450			
Purpose of Disbursement Ermk:by ContribCk-Mertz, Janet E Candidate Name			Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05			Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.24686 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 25.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Plonsey, Robert		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT District: 05		

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.24700 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 25.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Rochlin, Robert S		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT District: 05		

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.24709 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 20.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Soffler, Judy W		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT District: 05		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.24745 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 25.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Cohen, Miriam Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.24755 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 50.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Jensen, Herdis Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.24774 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 100.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Furstenberg, Edith H Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.24829 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 50.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Michelsen, Cleo		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT District: 05		

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26473 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 250.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Kahn, Emily		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT District: 05		

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26491 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 20.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-MacKay, Dorothy		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT District: 05		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26501 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 50.00	
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-White, Allyn B Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26503 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 25.00	
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Gesner, Harry H Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26504 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 30.00	
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Sitkin, Patricia Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26509 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 50.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Cline, Margaret B		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT District: 05		

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26516 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 1.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Klein, Aline		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT District: 05		

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26522 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 10.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Jones, Carolyn E.		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT District: 05		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26533 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 50.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Swift, Alice C Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26537 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 200.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Foldy, Roma B. Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26543 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 10.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Metzger, Bert L Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26556 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 100.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Creelman, James Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26562 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 50.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Lyngstad, Sverre Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26565 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 50.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Reeser, Charles T Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26567 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 50.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Norton, Libby Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26571 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 10.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Mosgofian, Seth D Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26577 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 10.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Engelhaupt, Joan Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26580 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 3.00	
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Struble, John R Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26592 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 200.00	
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Alpert, Ralph Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26599 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 50.00	
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Bardeen, James M Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26607 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 50.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Baker, Marshall Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26630 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 50.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Carlock, Helen L Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26635 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 50.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Christy, Robert W Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26640 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 100.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Driscoll, Charles F		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26648 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 10.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Eger, William H		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26682 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 25.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Felix, Gretchen S		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26694 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 500.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Groll, Donald S Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26701 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 10.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Gerstenfeld, Sol L Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26709 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 15.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Holmes, David L Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26718 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 25.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Harris, Marion P Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26728 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 50.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Jones, Bernadette B Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26742 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 50.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Johnson, Roger D Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26745 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 50.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Kerstein, Charles L		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26749 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 25.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Kaplan, Gloria S		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26760 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 100.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Kroot, Tina		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26764 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 80.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Loescher, Aase A		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26772 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 50.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Levy, John L		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26775 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 200.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Lamperti, John W		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26779 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 35.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Ludwig, Robert A		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT District: 05		

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26784 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 100.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Meislin, Barbara J		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT District: 05		

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26789 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 50.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Nielsen, John W		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT District: 05		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26796 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 17.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Oestreich, Alan E Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26819 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 100.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Reed, Jack D Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26829 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 20.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Roper, Peter G Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26833 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 20.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Rupel, William E Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26846 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 50.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Sullivan, Mary B Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26859 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 25.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Weatherby, Diana K Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26862 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 15.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Wright, George C Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26868 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 10.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Weisberg, Joel Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26872 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 25.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Wittner, Lawrence S Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26877 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 35.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Weingart, Mary Brizius Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26884 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 25.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Shor, A. Louis Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26889 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 10.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Kriegler, Bertha Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26896 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 2000.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Pretlow, Thomas G	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26906 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 5.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Goldberg, Lois E	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26915 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 40.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Fernbach, Harvey	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26924 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 100.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Benedict, Elizabeth Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26930 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 15.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Kurtz, Corinne Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26937 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 25.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Comandich, Rick Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26946 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 50.00	
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Ballbach, Philip Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26951 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 20.00	
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Thaw, Arnold Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26961 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006	
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 10.00	
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Martineau, Linden P Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26970 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 10.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Wagner, James D		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.26985 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 75.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Bushner, Rolland H		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.27002 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 50.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Zarate, Roberto		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.27005 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 20.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Sublett, Ramona Gale		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.27066 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 50.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Chase, Norene O		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.27071 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 10.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Rusby, Sherro M		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A. NED LAMONT FOR SENATE</b> Full Name (Last, First, Middle Initial) Mailing Address 300 RESEARCH PARKWAY City MERIDEN State CT Zip Code 06450 Purpose of Disbursement Ermk:by ContribCk-Grewal, David Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.27084 Date of Disbursement 09 / 27 / 2006 Amount of Each Disbursement this Period 100.00 [MEMO ITEM]
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<b>B. NED LAMONT FOR SENATE</b> Full Name (Last, First, Middle Initial) Mailing Address 300 RESEARCH PARKWAY City MERIDEN State CT Zip Code 06450 Purpose of Disbursement Ermk:by ContribCk-Holland, Ann Y Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.27103 Date of Disbursement 09 / 27 / 2006 Amount of Each Disbursement this Period 20.00 [MEMO ITEM]
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<b>C. NED LAMONT FOR SENATE</b> Full Name (Last, First, Middle Initial) Mailing Address 300 RESEARCH PARKWAY City MERIDEN State CT Zip Code 06450 Purpose of Disbursement Ermk:by ContribCk-Giunta, Robert R Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.27107 Date of Disbursement 09 / 27 / 2006 Amount of Each Disbursement this Period 10.00 [MEMO ITEM]
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.27110 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 25.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Moffat, James Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.27111 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 90.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Anderson, Carl Nestor Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.27124 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 15.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Boone, Vera Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.27127 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 100.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Crooks, Betty L		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.27162 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 50.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Lowry, John		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.27192 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 50.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Pine, Nancy		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.27198 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 100.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Renkin, Eugene M Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.27210 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 50.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Segel, David P Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.27238 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 250.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Davis, Milford H Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.27258 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 10.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Wachob, William K Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Category/Type		

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.27266 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 25.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Tommaso, Margaret Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Category/Type		

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.27279 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 500.00
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by ContribCk-Rosen, Charles Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Category/Type		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 867 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.27283 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 50.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Votey, Harold L		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.27298 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 10.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Bray, Bill		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.27497 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 50.00
City MERIDEN State CT Zip Code 06450	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Newman, Ezra T		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 868 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. NED LAMONT FOR SENATE</b>		Transaction ID: SB23.27528 Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2006	
Mailing Address 300 RESEARCH PARKWAY		Amount of Each Disbursement this Period 35.00	
City MERIDEN State CT Zip Code 06450	Purpose of Disbursement Ermk:by CreditCard-Gould, Harvey Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.27373 Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2006	
Mailing Address PO BOX 391		Amount of Each Disbursement this Period 100.00	
City BURLINGTON State VT Zip Code 05402	Purpose of Disbursement Ermk:by CreditCard-Bolker, Joan L Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.27555 Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2006	
Mailing Address PO BOX 391		Amount of Each Disbursement this Period 25.00	
City BURLINGTON State VT Zip Code 05402	Purpose of Disbursement Ermk:by CreditCard-Holt, Robert R Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.24659 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 391		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City BURLINGTON State VT Zip Code 05402		
Purpose of Disbursement Ermk:by ContribCk-Harper, Harriet P Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.24673 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 391		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City BURLINGTON State VT Zip Code 05402		
Purpose of Disbursement Ermk:by ContribCk-Litwak, Eleanor Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.24707 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 391		Amount of Each Disbursement this Period 20.00  <b>[MEMO ITEM]</b>
City BURLINGTON State VT Zip Code 05402		
Purpose of Disbursement Ermk:by ContribCk-Soffler, Judy W Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 870 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.24722 Date of Disbursement																					
Mailing Address PO BOX 391		<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>0</td><td>6</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		0	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		0	6		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-White, Carol S		Category/ Type	35.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.24743 Date of Disbursement																					
Mailing Address PO BOX 391		<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>0</td><td>6</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		0	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		0	6		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Brokstein, William B		Category/ Type	10.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.24760 Date of Disbursement																					
Mailing Address PO BOX 391		<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>0</td><td>6</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		0	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		0	6		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Makurath, Paul A		Category/ Type	25.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.24781 Date of Disbursement																					
Mailing Address PO BOX 391		<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>0</td><td>6</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		0	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		0	6		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-White, David A		Category/ Type	30.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																				
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.24785 Date of Disbursement																					
Mailing Address PO BOX 391		<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>0</td><td>6</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		0	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		0	6		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Gingher, Barbara J		Category/ Type	20.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																				
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.24823 Date of Disbursement																					
Mailing Address PO BOX 391		<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>0</td><td>6</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		0	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		0	6		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Toney, George R		Category/ Type	100.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																				
State: VT	District: 00																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.24828 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 391		Amount of Each Disbursement this Period 50.00
City BURLINGTON State VT Zip Code 05402	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Michelsen, Cleo		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.27401 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6
Mailing Address PO BOX 391		Amount of Each Disbursement this Period 50.00
City BURLINGTON State VT Zip Code 05402	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Ferger, John H		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.27418 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 6
Mailing Address PO BOX 391		Amount of Each Disbursement this Period 100.00
City BURLINGTON State VT Zip Code 05402	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Nickerson, Lawrie		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.27448 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 6
Mailing Address PO BOX 391		Amount of Each Disbursement this Period 500.00  <b>[MEMO ITEM]</b>
City BURLINGTON State VT Zip Code 05402		
Purpose of Disbursement Ermk:by CreditCard-Aiyer, Kamesh Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.27455 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 6
Mailing Address PO BOX 391		Amount of Each Disbursement this Period 30.00  <b>[MEMO ITEM]</b>
City BURLINGTON State VT Zip Code 05402		
Purpose of Disbursement Ermk:by CreditCard-Schulz, James H Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.27456 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 6
Mailing Address PO BOX 391		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City BURLINGTON State VT Zip Code 05402		
Purpose of Disbursement Ermk:by CreditCard-James, Nancy Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.26585 Date of Disbursement																					
Mailing Address PO BOX 391		<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>9</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	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	9		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Jacobson, Gail M		Category/ Type	50.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.26665 Date of Disbursement																					
Mailing Address PO BOX 391		<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>9</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	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	9		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Mullin, Sandra C		Category/ Type	15.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.26695 Date of Disbursement																					
Mailing Address PO BOX 391		<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>9</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	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	9		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Gaustad, John E		Category/ Type	200.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<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 875 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.26892 Date of Disbursement
Mailing Address PO BOX 391		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City BURLINGTON	State VT	Zip Code 05402
Purpose of Disbursement Ernk:by ContribCk-Frank, Ernest	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		
State: VT	District: 00	Amount of Each Disbursement this Period <input type="text" value="35.00"/>

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.26997 Date of Disbursement
Mailing Address PO BOX 391		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City BURLINGTON	State VT	Zip Code 05402
Purpose of Disbursement Ernk:by ContribCk-Reynolds, Stephen R	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		
State: VT	District: 00	Amount of Each Disbursement this Period <input type="text" value="50.00"/>

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.26489 Date of Disbursement
Mailing Address PO BOX 391		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2006"/>
City BURLINGTON	State VT	Zip Code 05402
Purpose of Disbursement Ernk:by ContribCk-MacKay, Dorothy	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		
State: VT	District: 00	Amount of Each Disbursement this Period <input type="text" value="20.00"/>

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<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)

PAGE 876 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.26514 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Klein, Aline		Category/ Type	1.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																				
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.26519 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Jones, Carolyn E.		Category/ Type	10.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																				
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.26526 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Hastings, Edwin H		Category/ Type	50.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																				
State: VT	District: 00																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<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 877 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.26531 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Swift, Alice C		Category/ Type	50.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.26540 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Metzger, Bert L		Category/ Type	10.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.26553 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Creelman, James		Category/ Type	100.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	0.00
<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 878 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.26568 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 391		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City BURLINGTON State VT Zip Code 05402		
Purpose of Disbursement Ermk:by ContribCk-Mosgofian, Seth D Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.26575 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6	
Mailing Address PO BOX 391		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>	
City BURLINGTON State VT Zip Code 05402			
Purpose of Disbursement Ermk:by ContribCk-Engelhaupt, Joan Candidate Name			Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00			Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.26610 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6	
Mailing Address PO BOX 391		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>	
City BURLINGTON State VT Zip Code 05402			
Purpose of Disbursement Ermk:by ContribCk-Baker, Marcia Candidate Name			Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00			Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 879 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.26611 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>2</td><td></td><td>2</td><td>0</td><td>6</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	2		2	0	6	
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	6															
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Brooks, Stephen A		Category/ Type	50.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.26619 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>2</td><td></td><td>2</td><td>0</td><td>6</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	2		2	0	6	
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	6															
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Crooks, Betty L		Category/ Type	100.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.26633 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>2</td><td></td><td>2</td><td>0</td><td>6</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	2		2	0	6	
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	6															
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Christy, Robert W		Category/ Type	50.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	0.00
<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 880 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.26636 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Driscoll, Charles F		Category/ Type	100.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.26668 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Nielsen, John W		Category/ Type	50.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.26678 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Felix, Gretchen S		Category/ Type	25.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<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 881 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.26698 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 391		Amount of Each Disbursement this Period 10.00 [MEMO ITEM]
City BURLINGTON State VT Zip Code 05402	Purpose of Disbursement Ermk:by ContribCk-Gerstenfeld, Sol L Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.26712 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 391		Amount of Each Disbursement this Period 25.00 [MEMO ITEM]
City BURLINGTON State VT Zip Code 05402	Purpose of Disbursement Ermk:by ContribCk-Harris, Marion P Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.26725 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 391		Amount of Each Disbursement this Period 100.00 [MEMO ITEM]
City BURLINGTON State VT Zip Code 05402	Purpose of Disbursement Ermk:by ContribCk-Jones, Bernadette B Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 882 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.26750 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Katz, Ilene		Category/ Type	10.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																				
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.26752 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Kemble, Jean A		Category/ Type	100.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																				
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.26758 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Kroot, Tina		Category/ Type	100.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																				
State: VT	District: 00																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	0.00
<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 883 / 932

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<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.26761 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Loescher, Aase A		Category/ Type	80.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	2006 <input checked="" type="checkbox"/> General																					
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.26768 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Lindemann, Elizabeth B		Category/ Type	25.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	2006 <input checked="" type="checkbox"/> General																					
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.26816 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Reed, Jack D		Category/ Type	100.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	2006 <input checked="" type="checkbox"/> General																					
State: VT	District: 00																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	0.00
<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 884 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.26830 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Rupel, William E		Category/ Type	20.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.26844 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Sullivan, Mary B		Category/ Type	50.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.26848 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Sullivan, Michael J		Category/ Type	3.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<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 885 / 932

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<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)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.26855 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 391		Amount of Each Disbursement this Period 50.00
City BURLINGTON State VT Zip Code 05402	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Sidel, Ruth Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.26861 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 391		Amount of Each Disbursement this Period 15.00
City BURLINGTON State VT Zip Code 05402	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Wright, George C Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.26874 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 391		Amount of Each Disbursement this Period 35.00
City BURLINGTON State VT Zip Code 05402	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Weingart, Mary Brizius Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 886 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.26903 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Goldberg, Lois E		Category/ Type	4.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																				
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.26921 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Benedict, Elizabeth		Category/ Type	100.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																				
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.26928 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Kurtz, Corinne		Category/ Type	15.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																				
State: VT	District: 00																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.26943 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Ballbach, Philip		Category/ Type	50.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.26948 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Thaw, Arnold		Category/ Type	20.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.26958 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Martineau, Linden P		Category/ Type	10.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.26965 Date of Disbursement
Mailing Address PO BOX 391		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2006"/>
City BURLINGTON	State VT	Zip Code 05402
Purpose of Disbursement Ermk:by ContribCk-Gallant, Steve	<input type="text"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: VT	District: 00	Amount of Each Disbursement this Period <input type="text" value="50.00"/>

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.26969 Date of Disbursement
Mailing Address PO BOX 391		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2006"/>
City BURLINGTON	State VT	Zip Code 05402
Purpose of Disbursement Ermk:by ContribCk-Wagner, James D	<input type="text"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: VT	District: 00	Amount of Each Disbursement this Period <input type="text" value="10.00"/>

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.26977 Date of Disbursement
Mailing Address PO BOX 391		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2006"/>
City BURLINGTON	State VT	Zip Code 05402
Purpose of Disbursement Ermk:by ContribCk-Kringel, Julia B	<input type="text"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: VT	District: 00	Amount of Each Disbursement this Period <input type="text" value="50.00"/>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.26986 Date of Disbursement 09 / 22 / 2006
Mailing Address PO BOX 391		Amount of Each Disbursement this Period 100.00
City BURLINGTON State VT Zip Code 05402	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Gray, Edward C		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.26999 Date of Disbursement 09 / 22 / 2006
Mailing Address PO BOX 391		Amount of Each Disbursement this Period 20.00
City BURLINGTON State VT Zip Code 05402	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Elliott, Roselyn		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.27049 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 391		Amount of Each Disbursement this Period 100.00
City BURLINGTON State VT Zip Code 05402	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Burnight, David R		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 890 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.27074 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>7</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		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	7		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Rusby, Sheroo M		Category/ Type	10.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.27079 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>7</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		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	7		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Pollak, Patricia L		Category/ Type	20.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.27088 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>7</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		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	7		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Grewal, David		Category/ Type	100.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<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 891 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.27098 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>7</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		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	7		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-deVall, Mary N		Category/ Type	25.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																				
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.27102 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>7</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		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	7		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Haig, Rose		Category/ Type	25.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																				
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.27133 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>7</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		2	7		2	0	0	6
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0	9		2	7		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Carpenter, Dwight W		Category/ Type	35.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																				
State: VT	District: 00																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	0.00
<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 892 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.27134 Date of Disbursement
Mailing Address PO BOX 391		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City BURLINGTON	State VT	Zip Code 05402
Purpose of Disbursement Ermk:by ContribCk-Chew, Ronald S		<input type="text" value="35.00"/> Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: VT	District: 00	

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.27155 Date of Disbursement
Mailing Address PO BOX 391		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City BURLINGTON	State VT	Zip Code 05402
Purpose of Disbursement Ermk:by ContribCk-Lowry, Ann		<input type="text" value="50.00"/> Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: VT	District: 00	

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.27166 Date of Disbursement
Mailing Address PO BOX 391		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City BURLINGTON	State VT	Zip Code 05402
Purpose of Disbursement Ermk:by ContribCk-Lowry, John		<input type="text" value="50.00"/> Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: VT	District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<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)

PAGE 893 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.27175 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>7</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		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	7		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Metzger, Albert		Category/ Type	35.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.27178 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>7</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		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	7		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Marshall, Hubert		Category/ Type	1000.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.27195 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>7</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		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	7		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Pine, Nancy		Category/ Type	50.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.27205 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>7</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		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	7		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ernk:by ContribCk-Richards, Frederic M		Category/ Type	200.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																				
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.27249 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>7</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		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	7		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ernk:by ContribCk-Farber, Joyce R		Category/ Type	100.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																				
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.27262 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>7</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		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	7		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ernk:by ContribCk-Wachob, William K		Category/ Type	10.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]																				
State: VT	District: 00																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<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 895 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.27268 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>7</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		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	7		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Wempner, Gerald		Category/ Type	20.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.27286 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>7</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		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	7		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Dean, Carol S		Category/ Type	50.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

Full Name (Last, First, Middle Initial) <b>C. SANDERS FOR SENATE</b>		Transaction ID: SB23.27293 Date of Disbursement																					
Mailing Address PO BOX 391		<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>2</td><td>7</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		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	7		2	0	0	6														
City BURLINGTON	State VT	Zip Code 05402	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ermk:by ContribCk-Barry, Patricia Joan		Category/ Type	40.00																				
Candidate Name			[MEMO ITEM]																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VT	District: 00																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	0.00
<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 896 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SANDERS FOR SENATE</b>		Transaction ID: SB23.27297 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2006
Mailing Address PO BOX 391		Amount of Each Disbursement this Period 25.00 <b>[MEMO ITEM]</b>
City BURLINGTON State VT Zip Code 05402	Purpose of Disbursement Ermk:by ContribCk-Zweibel, Ellen Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. SANDERS FOR SENATE</b>		Transaction ID: SB23.27299 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2006
Mailing Address PO BOX 391		Amount of Each Disbursement this Period 10.00 <b>[MEMO ITEM]</b>
City BURLINGTON State VT Zip Code 05402	Purpose of Disbursement Ermk:by ContribCk-Bray, Bill Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27561 Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 50.00 <b>[MEMO ITEM]</b>
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by CreditCard-Barnett, Octo Candidate Name Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 897 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.24695 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 5.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Roper, Peter G Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27411 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 6
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 50.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by CreditCard-Newman, Ezra T Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27450 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 6
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 50.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by CreditCard-Litt, Michael Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27458 Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 50.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by CreditCard-James, Nancy Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27462 Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 100.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by CreditCard-MacKenzie, David M Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.26486 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 30.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Collins, David Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.26499 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 10.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Field, Joyce F Candidate Name Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.26559 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 100.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Creelman, James Candidate Name Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.26673 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 10.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Eger, William H Candidate Name Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.26738 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 10.00  <b>[MEMO ITEM]</b>
City Media State PA Zip Code 19063	Category/ Type	
Purpose of Disbursement Ermk:by ContribCk-Johnson, Robert K Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7		

Full Name (Last, First, Middle Initial) <b>B. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.26744 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City Media State PA Zip Code 19063	Category/ Type	
Purpose of Disbursement Ermk:by ContribCk-Kaysen, Carl Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7		

Full Name (Last, First, Middle Initial) <b>C. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.26746 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Media State PA Zip Code 19063	Category/ Type	
Purpose of Disbursement Ermk:by ContribCk-Kerstein, Charles L Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.26806 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 200.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Quinn, Daniel j Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.26901 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 2000.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Pretlow, Thomas G Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.26918 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 30.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Fernbach, Harvey Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27479 Date of Disbursement 09 / 21 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 25.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by CreditCard-Carlock, Jeff Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27485 Date of Disbursement 09 / 23 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 50.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by CreditCard-Wolter, Daniel Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27489 Date of Disbursement 09 / 25 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 1000.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by CreditCard-Obermayer, Arthur S Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27490 Date of Disbursement 09 / 25 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 50.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by CreditCard-York, B. Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27046 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 100.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Lewis, Everett E Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27061 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 35.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Holt, Mary B Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27077 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 100.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Berry, Dale L Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27109 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 50.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Schmidt, Hartland Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27117 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 4.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Buchanan, Donald W Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27120 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 50.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Barsanti, Richard H Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27138 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 250.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Doering, Sarah C Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27141 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 50.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Freeman, David C Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27145 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 100.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Hoyer, Paul J Candidate Name Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27148 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 25.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Kaplan, Gloria S Candidate Name Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27150 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 25.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Kates, Inez L Candidate Name Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27153 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 50.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Kistiakowsky, Vera Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27157 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 50.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Loescher, Aase A Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27168 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 100.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Langland, James T Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27172 Date of Disbursement 09 / 27 / 2006	
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 25.00	
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Metzger, Albert Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27177 Date of Disbursement 09 / 27 / 2006	
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 100.00	
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Meislin, Barbara J Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27182 Date of Disbursement 09 / 27 / 2006	
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 35.00	
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Nielsen, John W Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27185 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 8.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Oestreich, Alan E Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27207 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 25.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Reed, Jack D Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27209 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 5.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Roper, Peter G Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27214 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 30.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Sweda, Edward L Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27215 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 20.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Stickney, Elizabeth J Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27219 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 50.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Toth, Edward K Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27221 Date of Disbursement 09 / 27 / 2006	
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 50.00	
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Tybout, Richard A Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27226 Date of Disbursement 09 / 27 / 2006	
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 250.00	
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Villers, Philippe Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27227 Date of Disbursement 09 / 27 / 2006	
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 15.00	
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Von Korff, Richard Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27237 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 50.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Siegel, Jack M Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27253 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 100.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Marks, John Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27272 Date of Disbursement 09 / 27 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 10.00
City Media State PA Zip Code 19063	Purpose of Disbursement Ermk:by ContribCk-Karig, Rita Reichman Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. SESTAK FOR CONGRESS</b>		Transaction ID: SB23.27496 Date of Disbursement 09 / 28 / 2006
Mailing Address P.O. Box 16		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City Media State PA Zip Code 19063		
Purpose of Disbursement Ermk:by CreditCard-Newman, Ezra T Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Sisk Mailing Service Inc.</b>		Transaction ID: SB23.27624 Date of Disbursement 09 / 07 / 2006
Mailing Address 203 Log Canoe Circle		Amount of Each Disbursement this Period 850.00
City Stevensville State MD Zip Code 21666		
Purpose of Disbursement In-kind: Postage Candidate Name JOSEPH A JR. SESTAK	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 7 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Sisk Mailing Service Inc.</b>		Transaction ID: SB23.27625 Date of Disbursement 09 / 07 / 2006
Mailing Address 203 Log Canoe Circle		Amount of Each Disbursement this Period 850.00
City Stevensville State MD Zip Code 21666		
Purpose of Disbursement In-kind: Postage Candidate Name PETER WELCH	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1700.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. Sisk Mailing Service Inc.</b>		Transaction ID: SB23.27626 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 7 / 2 0 0 6	
Mailing Address 203 Log Canoe Circle		Amount of Each Disbursement this Period 850.00	
City Stevensville State MD Zip Code 21666	Purpose of Disbursement In-kind: Postage	Category/ Type	
Candidate Name BRUCE L. BRALEY	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 01		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Sisk Mailing Service Inc.</b>		Transaction ID: SB23.27627 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 7 / 2 0 0 6	
Mailing Address 203 Log Canoe Circle		Amount of Each Disbursement this Period 850.00	
City Stevensville State MD Zip Code 21666	Purpose of Disbursement In-kind: Postage	Category/ Type	
Candidate Name JERRY MCNERNEY	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 11		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Sisk Mailing Service Inc.</b>		Transaction ID: SB23.27629 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6	
Mailing Address 203 Log Canoe Circle		Amount of Each Disbursement this Period 1125.00	
City Stevensville State MD Zip Code 21666	Purpose of Disbursement In-kind; Postage & Mailing Expenses	Category/ Type	
Candidate Name EDWARD M LAMONT	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2825.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. Sisk Mailing Service Inc.</b>		<b>Transaction ID: SB23.27630</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address 203 Log Canoe Circle		Amount of Each Disbursement this Period 1125.00
City State Zip Code Stevensville MD 21666		
Purpose of Disbursement In-kind; Postage & Mailing Expenses	Category/ Type	
Candidate Name SHERROD BROWN		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Sisk Mailing Service Inc.</b>		<b>Transaction ID: SB23.27631</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address 203 Log Canoe Circle		Amount of Each Disbursement this Period 1125.00
City State Zip Code Stevensville MD 21666		
Purpose of Disbursement In-kind; Postage & Mailing Expenses	Category/ Type	
Candidate Name BENJAMIN L CARDIN		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Sisk Mailing Service Inc.</b>		<b>Transaction ID: SB23.27632</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address 203 Log Canoe Circle		Amount of Each Disbursement this Period 1125.00
City State Zip Code Stevensville MD 21666		
Purpose of Disbursement In-kind; Postage & Mailing Expenses	Category/ Type	
Candidate Name BERNARD SANDERS		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3375.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. Sisk Mailing Service Inc.</b>		<b>Transaction ID: SB23.27634</b>																					
Mailing Address 203 Log Canoe Circle		Date of Disbursement																					
City State Zip Code Stevensville MD 21666		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
Purpose of Disbursement In-kind; Postage & Mailing Expenses		Amount of Each Disbursement this Period																					
Candidate Name DEBBIE STABENOW		<table border="1"> <tr> <td colspan="10">1125.00</td> </tr> </table>		1125.00																			
1125.00																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																					
State: MI District: 00																							

Full Name (Last, First, Middle Initial) <b>B. Sisk Mailing Service Inc.</b>		<b>Transaction ID: SB23.27635</b>																					
Mailing Address 203 Log Canoe Circle		Date of Disbursement																					
City State Zip Code Stevensville MD 21666		<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>2</td><td>2</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		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	2		2	0	0	6														
Purpose of Disbursement In-kind; Postage & Mailing Expenses		Amount of Each Disbursement this Period																					
Candidate Name LINCOLN D CHAFEE		<table border="1"> <tr> <td colspan="10">1125.00</td> </tr> </table>		1125.00																			
1125.00																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																					
State: RI District: 00																							

Full Name (Last, First, Middle Initial) <b>C. STABENOW FOR US SENATE</b>		<b>Transaction ID: SB23.27558</b>																					
Mailing Address PO BOX 4945		Date of Disbursement																					
City State Zip Code EAST LANSING MI 48826		<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>0</td><td>4</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		0	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		0	4		2	0	0	6														
Purpose of Disbursement Ernk:by CreditCard-Holt, Robert R		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">25.00</td> </tr> </table>		25.00																			
25.00																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																					
State: MI District: 00	<b>[MEMO ITEM]</b>																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2250.00</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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. STABENOW FOR US SENATE</b>		Transaction ID: SB23.27559 Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2006	
Mailing Address PO BOX 4945		Amount of Each Disbursement this Period 50.00	
City EAST LANSING State MI Zip Code 48826	Purpose of Disbursement Ermk:by CreditCard-Barnett, Octo Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. STABENOW FOR US SENATE</b>		Transaction ID: SB23.24670 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006	
Mailing Address PO BOX 4945		Amount of Each Disbursement this Period 35.00	
City EAST LANSING State MI Zip Code 48826	Purpose of Disbursement Ermk:by ContribCk-Joseph, Kenneth Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. STABENOW FOR US SENATE</b>		Transaction ID: SB23.24768 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2006	
Mailing Address PO BOX 4945		Amount of Each Disbursement this Period 20.00	
City EAST LANSING State MI Zip Code 48826	Purpose of Disbursement Ermk:by ContribCk-Gingher, Barbara J Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. STABENOW FOR US SENATE</b>		Transaction ID: SB23.24773 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO BOX 4945		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City EAST LANSING State MI Zip Code 48826		
Purpose of Disbursement Ermk:by ContribCk-Furstenberg, Edith H Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. STABENOW FOR US SENATE</b>		Transaction ID: SB23.27421 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 6
Mailing Address PO BOX 4945		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City EAST LANSING State MI Zip Code 48826		
Purpose of Disbursement Ermk:by CreditCard-Nickerson, Lawrie Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. STABENOW FOR US SENATE</b>		Transaction ID: SB23.26563 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address PO BOX 4945		Amount of Each Disbursement this Period 100.00  <b>[MEMO ITEM]</b>
City EAST LANSING State MI Zip Code 48826		
Purpose of Disbursement Ermk:by ContribCk-Church, Bethine L Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. STABENOW FOR US SENATE</b>		Transaction ID: SB23.27242 Date of Disbursement 09 / 27 / 2006
Mailing Address PO BOX 4945		Amount of Each Disbursement this Period 50.00  <b>[MEMO ITEM]</b>
City EAST LANSING	State MI Zip Code 48826	
Purpose of Disbursement Ermk:by ContribCk-Farber, Joyce R		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI District: 00		

Full Name (Last, First, Middle Initial) <b>B. WELCH FOR CONGRESS</b>		Transaction ID: SB23.27372 Date of Disbursement 09 / 01 / 2006
Mailing Address PO Box 1086		Amount of Each Disbursement this Period 25.00  <b>[MEMO ITEM]</b>
City Montpelier	State VT Zip Code 05601	
Purpose of Disbursement Ermk:by CreditCard-Wejrowski, Monna L.		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VT District: 00		

Full Name (Last, First, Middle Initial) <b>C. WELCH FOR CONGRESS</b>		Transaction ID: SB23.24719 Date of Disbursement 09 / 06 / 2006
Mailing Address PO Box 1086		Amount of Each Disbursement this Period 200.00  <b>[MEMO ITEM]</b>
City Montpelier	State VT Zip Code 05601	
Purpose of Disbursement Ermk:by ContribCk-Shearer, Rees R		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VT District: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. WELCH FOR CONGRESS</b>		Transaction ID: SB23.27423 Date of Disbursement 09 / 14 / 2006
Mailing Address PO Box 1086		Amount of Each Disbursement this Period 100.00
City Montpelier State VT Zip Code 05601	Purpose of Disbursement Ermk:by CreditCard-Trupin, Joel Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. WELCH FOR CONGRESS</b>		Transaction ID: SB23.26626 Date of Disbursement 09 / 19 / 2006
Mailing Address PO Box 1086		Amount of Each Disbursement this Period 50.00
City Montpelier State VT Zip Code 05601	Purpose of Disbursement Ermk:by ContribCk-Crooks, Betty L Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. WELCH FOR CONGRESS</b>		Transaction ID: SB23.27202 Date of Disbursement 09 / 27 / 2006
Mailing Address PO Box 1086		Amount of Each Disbursement this Period 200.00
City Montpelier State VT Zip Code 05601	Purpose of Disbursement Ermk:by ContribCk-Richards, Frederic M Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. WETTERLING '06</b>		Transaction ID: SB23.27563 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6	
Mailing Address P.O. Box 2295		Amount of Each Disbursement this Period 50.00	
City St. Cloud State MN Zip Code 56302	Purpose of Disbursement Ermk:by ContribCk-Potter, Neal Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. WETTERLING '06</b>		Transaction ID: SB23.26506 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6	
Mailing Address P.O. Box 2295		Amount of Each Disbursement this Period 20.00	
City St. Cloud State MN Zip Code 56302	Purpose of Disbursement Ermk:by ContribCk-Henighan, Richard P Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. WETTERLING '06</b>		Transaction ID: SB23.26624 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6	
Mailing Address P.O. Box 2295		Amount of Each Disbursement this Period 50.00	
City St. Cloud State MN Zip Code 56302	Purpose of Disbursement Ermk:by ContribCk-Crooks, Betty L Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. WETTERLING '06</b>		Transaction ID: SB23.26649 Date of Disbursement 09 / 19 / 2006
Mailing Address P.O. Box 2295		Amount of Each Disbursement this Period 15.00
City St. Cloud State MN Zip Code 56302	Purpose of Disbursement Ermk:by ContribCk-Eger, William H Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. WETTERLING '06</b>		Transaction ID: SB23.26803 Date of Disbursement 09 / 19 / 2006
Mailing Address P.O. Box 2295		Amount of Each Disbursement this Period 100.00
City St. Cloud State MN Zip Code 56302	Purpose of Disbursement Ermk:by ContribCk-Oskamp, Stuart Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. WETTERLING '06</b>		Transaction ID: SB23.26811 Date of Disbursement 09 / 19 / 2006
Mailing Address P.O. Box 2295		Amount of Each Disbursement this Period 50.00
City St. Cloud State MN Zip Code 56302	Purpose of Disbursement Ermk:by ContribCk-Renkin, Eugene M Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 923 / 932

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. WETTERLING '06</b>		Transaction ID: SB23.26828 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address P.O. Box 2295		Amount of Each Disbursement this Period 50.00
City St. Cloud State MN Zip Code 56302	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Rogers, Lorraine K Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. WETTERLING '06</b>		Transaction ID: SB23.26898 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address P.O. Box 2295		Amount of Each Disbursement this Period 1000.00
City St. Cloud State MN Zip Code 56302	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Pretlow, Thomas G Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. WETTERLING '06</b>		Transaction ID: SB23.26994 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address P.O. Box 2295		Amount of Each Disbursement this Period 250.00
City St. Cloud State MN Zip Code 56302	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Walsh, Roger N Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. WETTERLING '06</b>		Transaction ID: SB23.27112 Date of Disbursement 09 / 27 / 2006	
Mailing Address P.O. Box 2295		Amount of Each Disbursement this Period 10.00	
City St. Cloud State MN Zip Code 56302	Purpose of Disbursement Ermk:by ContribCk-Albrecht, Kathryn Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. WOOLSEY FOR CONGRESS</b>		Transaction ID: SB23.27394 Date of Disbursement 09 / 05 / 2006	
Mailing Address P.O. Box 750176		Amount of Each Disbursement this Period 25.00	
City Petaluma State CA Zip Code 94975	Purpose of Disbursement Ermk:by CreditCard-Klein, Marc Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. WOOLSEY FOR CONGRESS</b>		Transaction ID: SB23.26674 Date of Disbursement 09 / 19 / 2006	
Mailing Address P.O. Box 750176		Amount of Each Disbursement this Period 10.00	
City Petaluma State CA Zip Code 94975	Purpose of Disbursement Ermk:by ContribCk-Eger, William H Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. ZACK SPACE FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.27435 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 714 N WOOSTER AVENUE		Amount of Each Disbursement this Period 100.00
City DOVER State OH Zip Code 44622	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Coffin, Stephen A		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. ZACK SPACE FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.27436 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 714 N WOOSTER AVENUE		Amount of Each Disbursement this Period 25.00
City DOVER State OH Zip Code 44622	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Cohen, Bruce S		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. ZACK SPACE FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.27437 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 714 N WOOSTER AVENUE		Amount of Each Disbursement this Period 50.00
City DOVER State OH Zip Code 44622	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-White, Anne S		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. ZACK SPACE FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.27438 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 714 N WOOSTER AVENUE		Amount of Each Disbursement this Period 50.00
City DOVER State OH Zip Code 44622	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Schiffmann, Elliott		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 18		

Full Name (Last, First, Middle Initial) <b>B. ZACK SPACE FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.27439 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 714 N WOOSTER AVENUE		Amount of Each Disbursement this Period 10.00
City DOVER State OH Zip Code 44622	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Castillo, John		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 18		

Full Name (Last, First, Middle Initial) <b>C. ZACK SPACE FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.27440 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 714 N WOOSTER AVENUE		Amount of Each Disbursement this Period 25.00
City DOVER State OH Zip Code 44622	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Harisay, Richard		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 18		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. ZACK SPACE FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.27452 Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2006
Mailing Address 714 N WOOSTER AVENUE		Amount of Each Disbursement this Period 50.00
City DOVER State OH Zip Code 44622	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Carlip, Vivian M		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. ZACK SPACE FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.27453 Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2006
Mailing Address 714 N WOOSTER AVENUE		Amount of Each Disbursement this Period 25.00
City DOVER State OH Zip Code 44622	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Drew, Bruce A		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. ZACK SPACE FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.27465 Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2006
Mailing Address 714 N WOOSTER AVENUE		Amount of Each Disbursement this Period 25.00
City DOVER State OH Zip Code 44622	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Bloomenthal, Martin		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. ZACK SPACE FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.26639 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 714 N WOOSTER AVENUE		Amount of Each Disbursement this Period 120.00
City DOVER State OH Zip Code 44622	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Driscoll, Charles F		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. ZACK SPACE FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.26691 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 714 N WOOSTER AVENUE		Amount of Each Disbursement this Period 200.00
City DOVER State OH Zip Code 44622	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Golodetz, Arnold		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. ZACK SPACE FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.26717 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 714 N WOOSTER AVENUE		Amount of Each Disbursement this Period 50.00
City DOVER State OH Zip Code 44622	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Harris, Marion P		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. ZACK SPACE FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.26895 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 714 N WOOSTER AVENUE		Amount of Each Disbursement this Period 2000.00
City DOVER State OH Zip Code 44622	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Pretlow, Thomas G		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. ZACK SPACE FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.26914 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 714 N WOOSTER AVENUE		Amount of Each Disbursement this Period 30.00
City DOVER State OH Zip Code 44622	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Fernbach, Harvey		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. ZACK SPACE FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.27466 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2006
Mailing Address 714 N WOOSTER AVENUE		Amount of Each Disbursement this Period 25.00
City DOVER State OH Zip Code 44622	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Siegla, A Joanne		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. ZACK SPACE FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.27476 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 6	
Mailing Address 714 N WOOSTER AVENUE		Amount of Each Disbursement this Period 25.00	
City DOVER State OH Zip Code 44622	Purpose of Disbursement Ermk:by CreditCard-Krieg, David R		
Candidate Name	Category/Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. ZACK SPACE FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.27139 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6	
Mailing Address 714 N WOOSTER AVENUE		Amount of Each Disbursement this Period 15.00	
City DOVER State OH Zip Code 44622	Purpose of Disbursement Ermk:by ContribCk-Eger, William H		
Candidate Name	Category/Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. ZACK SPACE FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.27232 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6	
Mailing Address 714 N WOOSTER AVENUE		Amount of Each Disbursement this Period 50.00	
City DOVER State OH Zip Code 44622	Purpose of Disbursement Ermk:by ContribCk-Zakin, Jacques L		
Candidate Name	Category/Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

Full Name (Last, First, Middle Initial) <b>A. ZACK SPACE FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: SB23.27275</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 714 N WOOSTER AVENUE		Amount of Each Disbursement this Period 500.00
City DOVER State OH Zip Code 44622	[MEMO ITEM]	
Purpose of Disbursement Ermk:by ContribCk-Rosen, Charles		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. ZACK SPACE FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: SB23.27499</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 714 N WOOSTER AVENUE		Amount of Each Disbursement this Period 50.00
City DOVER State OH Zip Code 44622	[MEMO ITEM]	
Purpose of Disbursement Ermk:by CreditCard-Newman, Ezra T		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**TOTAL** This Period (last page this line number only) ..... ►

15175.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 932 / 932
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
 COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Cantrell/Cutter	Nature of Debt (Purpose): Printing
Mailing Address 1789 Olive Street	
City State ZIP Code Capital Heights MD 20743	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: SD10.29521</b>	
Amount Incurred This Period 5181.75	Payment This Period 0.00	Outstanding Balance at Close of This Period 5181.75

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Sisk Mailing Service Inc.	Nature of Debt (Purpose): Postage & Mailing Expenses
Mailing Address 203 Log Canoe Circle	
City State ZIP Code Stevensville MD 21666	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: SD10.29522</b>	
Amount Incurred This Period 913.50	Payment This Period 0.00	Outstanding Balance at Close of This Period 913.50

1) <b>SUBTOTALS</b> This Period This Page (optional).....	6095.25
2) <b>TOTALS</b> This Period (last page this line number only).....	6095.25
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)	