

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

HD

Office Use Only

SECRETARY OF THE SENATE
07 DEC 14 PM 3:02

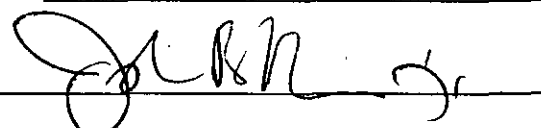
1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Democratic Senatorial Campaign Committee

ADDRESS (number and street) 120 Maryland Avenue, NE
Washington DC 20002

2. FEC IDENTIFICATION NUMBER C00042366
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 2007 through 09 30 2007

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 B. Poersch, Jr.
Signature of Treasurer  Date 12 11 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.

Office Use Only									
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27020400708

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Democratic Senatorial Campaign Committee

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; vertical-align: middle;"><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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		63369.79
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	20644920.42									
(c) Total Receipts (from Line 19)	5308993.50	42009284.96								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	25953913.92	42072654.75								
7. Total Disbursements (from Line 31)	3065412.58	19184153.41								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	22888501.34	22888501.34								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	16635.40									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	3000000.00									

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

For further information contact:

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

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

27020400709

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Democratic Senatorial Campaign Committee

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	W	Y
2	0	0	7

To:

M	M
0	9

D	D
3	0

Y	Y	W	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	2973783.49	27941572.64
(ii) Unitemized	919305.95	6012300.62
(iii) TOTAL (add Lines 11(a)(i) and (ii)	3893089.44	33953873.26
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	1050500.00	6614074.96
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	4943589.44	40567948.22
12. Transfers From Affiliated/Other Party Committees	333252.51	866472.96
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)	26924.15	326984.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	5227.40	247879.78
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))	5308993.50	42009284.96
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5308993.50	42009284.96

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DETAILED SUMMARY PAGE
of Disbursements

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Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	2268287.58	15451627.71
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	2268287.58	15451627.71
22. Transfers to Affiliated/Other Party Committees.....	101750.00	366825.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	79800.00	159600.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	9375.00	75674.70
26. Loan Repayments Made.....	500000.00	3000000.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	12500.00	33226.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	12500.00	34226.00
29. Other Disbursements.....	93700.00	96200.00
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))..	3065412.58	19184153.41
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	3065412.58	19184153.41

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	4943589.44	40567948.22
34. Total Contribution Refunds (from Line 28(d))	12500.00	34226.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4931089.44	40533722.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2268287.58	15451627.71
37. Offsets to Operating Expenditures (from Line 15, page 3)	26924.15	326984.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2241363.43	15124643.71

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" 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)
Democratic Senatorial Campaign Committee

A. The Crime Victim's Fund

Full Name (Last, First, Middle Initial)
Mailing Address 707 Broadway Ste 700

City San Diego State CA Zip Code 92101

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB28A-47081
Date of Disbursement
09 / 05 / 2007

Amount of Each Disbursement this Period
43700.00

In lieu of refund to Norman Hsu (contributions dated 1/13/07, 5/9/05 and 9/3-0/04).

B. Fisher House Foundation, Inc.

Full Name (Last, First, Middle Initial)
Mailing Address 1401 Rockville Pike Ste 600

City Rockville State MD Zip Code 20852

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB28A-47083
Date of Disbursement
09 / 06 / 2007

Amount of Each Disbursement this Period
6000.00

In lieu of ref of contr from Sentorsa Services, LLC 8/10/06 and Prompt Nursing Emp Age. LLC 12/29/05

C. Nachum Singer

Full Name (Last, First, Middle Initial)
Mailing Address 204 Broadway

City Brooklyn State NY Zip Code 11211

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB28A-47083-10000
Date of Disbursement
09 / 06 / 2007

Amount of Each Disbursement this Period
6000.00

[MEMO ITEM]
Partner-Sentorsa Servs LLC & Prompt Nursing Emp Agency. LLC

SUBTOTAL of Disbursements This Page (optional) ▶ 49700.00

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

27020400713

**SCHEDULE 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 940 / 954	
<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b
<input type="checkbox"/>		<input type="checkbox"/>	24	<input type="checkbox"/>	25
<input type="checkbox"/>		<input type="checkbox"/>	28c	<input checked="" type="checkbox"/>	29
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	26
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)
Democratic Senatorial Campaign Committee

A. Medicare Rights Center

Full Name (Last, First, Middle Initial)
A. Medicare Rights Center

Mailing Address 520 Eight Ave.
North Wing 3rd Fl.

City New York State NY Zip Code 10018

Purpose of Disbursement
Contribution Refund

Candidate Name Category/Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Transaction ID: SB28A-47084
Date of Disbursement
09 / 06 / 2007

Amount of Each Disbursement this Period
6000.00

In lieu of ref of contr from Sentorsa Services, LLC 8/10/06 and Prompt Nursing Emp Age, LLC 12/29/05

B. Nachum Singer

Full Name (Last, First, Middle Initial)
Nachum Singer

Mailing Address 204 Broadway

City Brooklyn State NY Zip Code 11211

Purpose of Disbursement
Contribution Refund

Candidate Name Category/Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Transaction ID: SB28A-47083-10000
Date of Disbursement
09 / 06 / 2007

Amount of Each Disbursement this Period
6000.00

[MEMO ITEM]
Partner-Sentorsa Servs LLC & Prompt Nursing Emp Agency, LLC

C. National Prostate Cancer Coalition

Full Name (Last, First, Middle Initial)
National Prostate Cancer Coalition

Mailing Address 1154 15th St.. NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Contribution Refund

Candidate Name Category/Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Transaction ID: SB28A-47085
Date of Disbursement
09 / 06 / 2007

Amount of Each Disbursement this Period
6000.00

In lieu of ref of contr from Sentorsa Services, LLC 8/10/06 and Prompt Nursing Emp Age, LLC 12/29/05

SUBTOTAL of Disbursements This Page (optional)	12000.00
TOTAL This Period (last page this line number only)	

27020400714

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Senatorial Campaign Committee

A. Full Name (Last, First, Middle Initial)
Nachum Singer

Mailing Address 204 Broadway

City Brooklyn State NY Zip Code 11211

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB28A-47083-10000

Date of Disbursement
MM / DD / YYYY
09 / 06 / 2007

Amount of Each Disbursement this Period

6000.00

[MEMO ITEM]

Partner-Sentorsa Servs LLC & Prompt Nursing Emp Agency, LLC

B. Full Name (Last, First, Middle Initial)
Strive

Mailing Address 240 East 123rd Street

City New York State NY Zip Code 10035-2038

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB28A-47086

Date of Disbursement
MM / DD / YYYY
09 / 06 / 2007

Amount of Each Disbursement this Period

6000.00

In lieu of ref of contr from Sentorsa Services, LLC 8/10/06 and Prompt Nursing Emp Age, LLC 12/29/05

C. Full Name (Last, First, Middle Initial)
Nachum Singer

Mailing Address 204 Broadway

City Brooklyn State NY Zip Code 11211

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB28A-47083-10000

Date of Disbursement
MM / DD / YYYY
09 / 06 / 2007

Amount of Each Disbursement this Period

6000.00

[MEMO ITEM]

Partner-Sentorsa Servs LLC & Prompt Nursing Emp Agency, LLC

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

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

27020400715

**SCHEDULE 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 942 / 954
<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b
<input type="checkbox"/> 24	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Democratic Senatorial Campaign Committee

A. Full Name (Last, First, Middle Initial)
Unsung Heroes Helping Heroes

Mailing Address PO Box 20100

City Huntington Station State NY Zip Code 11746

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB28A-47087

Date of Disbursement
09 / 06 / 2007

Amount of Each Disbursement this Period
8000.00

In lieu of ref of contr from Sentorsa Services, LLC 8/10/06 and Prompt Nursing Emp Age, LLC 12/29/05

B. Full Name (Last, First, Middle Initial)
Nachum Singer

Mailing Address 204 Broadway

City Brooklyn State NY Zip Code 11211

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB28A-47083-10000

Date of Disbursement
09 / 06 / 2007

Amount of Each Disbursement this Period
8000.00

[MEMO ITEM]
Partner-Sentorsa Servs LLC & Prompt Nursing Emp Agency. LLC

C. Full Name (Last, First, Middle Initial)
Wounded Warrior Project

Mailing Address PO Box 758517

City Topeka State KS Zip Code 66675-8517

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB28A-47088

Date of Disbursement
09 / 06 / 2007

Amount of Each Disbursement this Period
6000.00

In lieu of ref of contr from Sentorsa Services, LLC 8/10/06 and Prompt Nursing Emp Age, LLC 12/29/05

SUBTOTAL of Disbursements This Page (optional) ▶ 14000.00

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

27020400716

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Senatorial Campaign Committee

A. Full Name (Last, First, Middle Initial)
Nachum Singer

Mailing Address 204 Broadway

City Brooklyn State NY Zip Code 11211

Purpose of Disbursement
Contribution Refund Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB28A-47083-10000
Date of Disbursement
09 / 06 / 2007

Amount of Each Disbursement this Period
6000.00

[MEMO ITEM]
Partner-Sentorsa Servs LLC & Prompt Nursing Emp Agency. LLC

B. Full Name (Last, First, Middle Initial)
Juvenile Diabetes Research Foundation

Mailing Address 120 Wall Street 19th Fl

City New York State NY Zip Code 10005

Purpose of Disbursement
Contribution Refund Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB28A-47089
Date of Disbursement
09 / 06 / 2007

Amount of Each Disbursement this Period
6000.00

In lieu of ref of contr from Sentorsa Services, LLC 8/10/06 and Prompt Nursing Emp Age, LLC 12/29/05

C. Full Name (Last, First, Middle Initial)
Nachum Singer

Mailing Address 204 Broadway

City Brooklyn State NY Zip Code 11211

Purpose of Disbursement
Contribution Refund Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB28A-47083-10000
Date of Disbursement
09 / 06 / 2007

Amount of Each Disbursement this Period
6000.00

[MEMO ITEM]
Partner-Sentorsa Servs LLC & Prompt Nursing Emp Agency. LLC

SUBTOTAL of Disbursements This Page (optional)	6000.00
TOTAL This Period (last page this line number only)	

27020400717

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Senatorial Campaign Committee

A. Full Name (Last, First, Middle Initial)
Medicaid Matters New York

Mailing Address Center for Disability Rights
497 State Street

City Rochester State NY Zip Code 14608-1642

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: SB28A-47090
Date of Disbursement
09 / 06 / 2007

Amount of Each Disbursement this Period
6000.00

In lieu of ref of contr
from Sentorsa Services,
LLC 8/10/06 and Prompt Nu-
rsing Emp Age, LLC 12/29/05

B. Full Name (Last, First, Middle Initial)
Nachum Singer

Mailing Address 204 Broadway

City Brooklyn State NY Zip Code 11211

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: SB28A-47083-10000
Date of Disbursement
09 / 06 / 2007

Amount of Each Disbursement this Period
6000.00

[MEMO ITEM]
Partner-Sentorsa Servs LLC
& Prompt Nursing Emp Agen-
cy. LLC

SUBTOTAL of Disbursements This Page (optional)	6000.00
TOTAL This Period (last page this line number only)	93700.00

27020400718

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Senatorial Campaign Committee

A. Full Name (Last, First, Middle Initial)
Nixon Peabody

Mailing Address 1100 Clinton Square

City Rochester State NY Zip Code 14604

Purpose of Disbursement
Contribution Refund Category/Type

Candidate Name Category/Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB28A-47077
Date of Disbursement
09 / 06 / 2007

Amount of Each Disbursement this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Carmen Warschaw

Mailing Address 1299 Ocean Ave Ste 300

City Santa Monica State CA Zip Code 90401

Purpose of Disbursement
Contribution Refund Category/Type

Candidate Name Category/Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB28A-47404
Date of Disbursement
09 / 26 / 2007

Amount of Each Disbursement this Period
6500.00

C. Full Name (Last, First, Middle Initial)
Mary Patricia Wheeler

Mailing Address 188 E 78th St., #31-B

City New York State NY Zip Code 10021

Purpose of Disbursement
Contribution Refund Category/Type

Candidate Name Category/Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB28A-47405
Date of Disbursement
09 / 27 / 2007

Amount of Each Disbursement this Period
1000.00

SUBTOTAL of Disbursements This Page (optional)	12500.00
TOTAL This Period (last page this line number only)	12500.00

27020400719

Form/Schedule: **SB29** In lieu of refund to Norman Hsu (contributions dated 1/13/07, 5/9/05 and 9/30/04).
Transaction ID: **SB29-47081**

Form/Schedule: **SB29** In lieu of ref of contr from Sentorsa Services, LLC 8/10/06 and Prompt Nursing Emp Age, LLC 12/29/05
Transaction ID: **SB29-47083**

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Form/Schedule: **SB29** In lieu of ref of contr from Sentorsa Services, LLC 8/10/06 and Prompt Nursing Emp Age, LLC 12/29/05
Transaction ID: **SB29-47084**

Form/Schedule: **SB29** In lieu of ref of contr from Sentorsa Services, LLC 8/10/06 and Prompt Nursing Emp Age, LLC 12/29/05
Transaction ID: **SB29-47085**

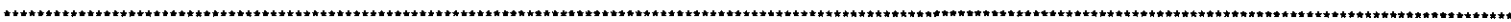
27020400721



Form/Schedule: **SB29** In lieu of ref of contr from Sentorsa Services, LLC 8/10/06 and Prompt Nursing Emp Age, LLC 12/29/05
Transaction ID: **SB29-47086**

Form/Schedule: **SB29** In lieu of ref of contr from Sentorsa Services, LLC 8/10/06 and Prompt Nursing Emp Age, LLC 12/29/05
Transaction ID: **SB29-47087**

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Form/Schedule: **SB29** In lieu of ref of contr from Sentorsa Services, LLC 8/10/06 and Prompt Nursing Emp Age, LLC 12/29/05
Transaction ID: **SB29-47088**

Form/Schedule: **SB29** In lieu of ref of contr from Sentorsa Services, LLC 8/10/06 and Prompt Nursing Emp Age, LLC 12/29/05
Transaction ID: **SB29-47089**

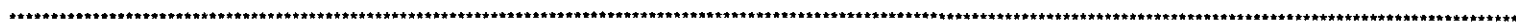
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Form/Schedule: **SB29** In lieu of ref of contr from Sentorsa Services, LLC 8/10/06 and Prompt Nursing Emp Age, LLC 12/29/05
Transaction ID: **SB29-47090**

Form/Schedule: **SA12** Also see memo entries 8/07
Transaction ID: **SA12-47263**

27020400724



NANCY ERICKSON
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
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United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 12-14-07
Date of Receipt

USPS FIRST CLASS MAIL _____
Postmark

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Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

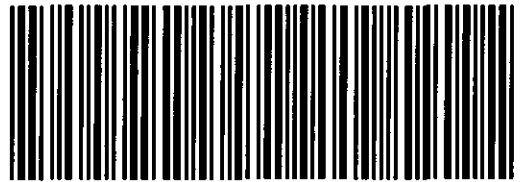
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Date of Receipt or Postmark

PREPARER DH DATE PREPARED 12-14-07

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