

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 430 South Capitol Street, SE
2nd Floor
 Check if different than previously reported. (ACC)
Washington DC 20003

2. **FEC IDENTIFICATION NUMBER** C00000935
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 01 01 2009 through 01 31 2009

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 Jonathan S. Vogel

Signature of Treasurer Electronically Filed by Jonathan S. Vogel Date 08 03 2009

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Democratic Congressional Campaign Committee

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><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>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		491852.26
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	491852.26									
(c) Total Receipts (from Line 19)	3521784.35	3521784.35								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	4013636.61	4013636.61								
7. Total Disbursements (from Line 31)	2000805.92	2000805.92								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2012830.69	2012830.69								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	16300094.04									

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Democratic Congressional Campaign Committee

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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)	1263613.80	1263613.80
(ii) Unitemized	871547.42	871547.42
(iii) TOTAL (add Lines 11(a)(i) and (ii)	2135161.22	2135161.22
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	532771.71	532771.71
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	2667932.93	2667932.93
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)	10411.32	10411.32
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	843440.10	843440.10
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))	3521784.35	3521784.35
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	3521784.35	3521784.35

DETAILED SUMMARY PAGE

of Disbursements

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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.....	1931113.27	1931113.27
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1931113.27	1931113.27
22. Transfers to Affiliated/Other Party Committees.....	13000.00	13000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	-1717.73	-1717.73
24. Independent Expenditure (use Schedule E)	49461.00	49461.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	5674.38	5674.38
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	3275.00	3275.00
(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))	3275.00	3275.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	2000805.92	2000805.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2000805.92	2000805.92

DETAILED SUMMARY PAGE
of Disbursements

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	2667932.93	2667932.93
34. Total Contribution Refunds (from Line 28(d))	3275.00	3275.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2664657.93	2664657.93
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1931113.27	1931113.27
37. Offsets to Operating Expenditures (from Line 15, page 3)	10411.32	10411.32
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1920701.95	1920701.95

SCHEDULE C (FEC Form 3X)

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

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FOR LINE 13 OF FORM 3X

LOANS

NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

Transaction ID: SC-6730

LOAN SOURCE Full Name (Last, First, Middle Initial)
Bank of America, NA

Mailing Address 730 15th Street, NW

City Washington State DC ZIP Code 20005

Election:
 Primary
 General
 Other (specify) ▼

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
20000000.00	8500000.00	11500000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
MM DD YY YY 09 08 2008	03/31/2010	BBA LIBOR + 3 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	11500000.00
TOTALS This Period (last page in this line only)	11500000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Action Mailers, Inc.	Nature of Debt (Purpose): Generic Cmte. Printing
Mailing Address 90 Commerce Drive	
City State ZIP Code Aston PA 19014	

Outstanding Balance Beginning This Period 91967.38	Transaction ID: SD-6625	
Amount Incurred This Period 199391.48	Payment This Period 190507.51	Outstanding Balance at Close of This Period 100851.35

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor American List Counsel, Inc.	Nature of Debt (Purpose): List Rental
Mailing Address P.O. Box 32189	
City State ZIP Code Hartford CT 06150-2189	

Outstanding Balance Beginning This Period 12052.48	Transaction ID: SD-6626	
Amount Incurred This Period 94036.85	Payment This Period 7811.18	Outstanding Balance at Close of This Period 98278.15

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Allied Printing Resources	Nature of Debt (Purpose): Generic Cmte. Printing
Mailing Address P.O. Box 6506 455 Washington Ave.	
City State ZIP Code Carlstadt NJ 07072	

Outstanding Balance Beginning This Period 143539.60	Transaction ID: SD-6627	
Amount Incurred This Period 449.19	Payment This Period 0.00	Outstanding Balance at Close of This Period 143988.79

1) SUBTOTALS This Period This Page (optional).....	▶	343118.29
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Allied Web Services	Nature of Debt (Purpose): Generic Cmte. Printing
Mailing Address 1120 McKenzie Road	
City State ZIP Code Lake Helen FL 32744	

Outstanding Balance Beginning This Period 19044.00	Transaction ID: SD-6628	
Amount Incurred This Period 18860.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 37904.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor All Stage & Sound Inc.	Nature of Debt (Purpose): Generic Cmte. Events/Meetings
Mailing Address 21500 Laytonville Road	
City State ZIP Code Laytonville MD 20882	

Outstanding Balance Beginning This Period 3491.75	Transaction ID: SD-6629	
Amount Incurred This Period 0.00	Payment This Period 3491.75	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Anzalone Liszt Research, Inc.	Nature of Debt (Purpose): Generic Cmte. Polling
Mailing Address 260 Commerce Street 4th Floor	
City State ZIP Code Montgomery AL 36104	

Outstanding Balance Beginning This Period 287250.00	Transaction ID: SD-6630	
Amount Incurred This Period 0.00	Payment This Period 59000.00	Outstanding Balance at Close of This Period 228250.00

1) SUBTOTALS This Period This Page (optional).....	266154.00
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jocelyn Augustino Photographer			Nature of Debt (Purpose): Fundraising Events/Meetings
Mailing Address 3416 Gunston Road			
City Alexandria	State VA	ZIP Code 22302	

Outstanding Balance Beginning This Period 3102.00		Transaction ID: SD-6636	
Amount Incurred This Period -1435.50	Payment This Period 0.00	Outstanding Balance at Close of This Period 1666.50	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Avalanche Services			Nature of Debt (Purpose): Generic Cmte. Printing
Mailing Address 515-B Industrial Blvd			
City Kearneysville	State WV	ZIP Code 25430	

Outstanding Balance Beginning This Period 23208.25		Transaction ID: SD-6637	
Amount Incurred This Period 29702.50	Payment This Period 22233.25	Outstanding Balance at Close of This Period 30677.50	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Benenson Strategy Group			Nature of Debt (Purpose): Generic Cmte. Polling
Mailing Address 14 East 60th Street Suite 1002			
City New York	State NY	ZIP Code 10022	

Outstanding Balance Beginning This Period 69100.00		Transaction ID: SD-6638	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 69100.00	

1) SUBTOTALS This Period This Page (optional).....	101444.00
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Blue State Digital, LLC	Nature of Debt (Purpose): Generic Cmte. OnLine Services
Mailing Address 734 15th Street, NW Suite 1200	
City State ZIP Code Washington DC 20005	

Outstanding Balance Beginning This Period <input type="text" value="20550.00"/>	Transaction ID: SD-6639	
Amount Incurred This Period <input type="text" value="41100.00"/>	Payment This Period <input type="text" value="20550.00"/>	Outstanding Balance at Close of This Period <input type="text" value="41100.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bennett, Petts & Normington, LLC	Nature of Debt (Purpose): Generic Cmte. Polling
Mailing Address 1010 Wisconsin Ave., NW Suite 208	
City State ZIP Code Washington DC 20007	

Outstanding Balance Beginning This Period <input type="text" value="54000.00"/>	Transaction ID: SD-6641	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="54000.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Brilliant Corners Research, Inc.	Nature of Debt (Purpose): Generic Cmte. Polling
Mailing Address 1336 North Capitol Street, NW 2nd Floor	
City State ZIP Code Washington DC 20002	

Outstanding Balance Beginning This Period <input type="text" value="56000.00"/>	Transaction ID: SD-6642	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="22000.00"/>	Outstanding Balance at Close of This Period <input type="text" value="34000.00"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="129100.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 11 / 345
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Care2.com, Inc.	Nature of Debt (Purpose): List Rental
Mailing Address 275 Shoreline Dr #150	
City State ZIP Code Redwood City CA 94065	

Outstanding Balance Beginning This Period 3161.65	Transaction ID: SD-6644	
Amount Incurred This Period 0.00	Payment This Period 3161.65	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Carey International, Inc.	Nature of Debt (Purpose): Travel
Mailing Address Billing Department P.O. Box 631414	
City State ZIP Code Baltimore MD 21263-1414	

Outstanding Balance Beginning This Period 2885.47	Transaction ID: SD-6645	
Amount Incurred This Period 4582.21	Payment This Period 2885.47	Outstanding Balance at Close of This Period 4582.21

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor C & E Systems, LLC	Nature of Debt (Purpose): Equipment Rental/Maintenance
Mailing Address 2236 SE 10th Ave	
City State ZIP Code Portland OR 97214	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD-6646	
Amount Incurred This Period 2100.00	Payment This Period 700.00	Outstanding Balance at Close of This Period 1400.00

1) SUBTOTALS This Period This Page (optional).....	▶	5982.21
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Media Analysis Group			Nature of Debt (Purpose): Strategic/Political Services
Mailing Address Post Office Box 7247-9301			
City Philadelphia	State PA	ZIP Code 19170	

Outstanding Balance Beginning This Period <input type="text" value="33750.00"/>		Transaction ID: SD-6648	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="16875.00"/>	Outstanding Balance at Close of This Period <input type="text" value="16875.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Commonwealth Digital Office Solutions			Nature of Debt (Purpose): Copying
Mailing Address 21205 Ridgetop Circle			
City Sterling	State VA	ZIP Code 20166-6501	

Outstanding Balance Beginning This Period <input type="text" value="1061.80"/>		Transaction ID: SD-6650	
Amount Incurred This Period <input type="text" value="364.85"/>	Payment This Period <input type="text" value="1092.04"/>	Outstanding Balance at Close of This Period <input type="text" value="334.61"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Crystal Valet			Nature of Debt (Purpose): Generic Cmte. Events/Meetings
Mailing Address 616 West College Street			
City Los Angeles	State CA	ZIP Code 90012	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD-6651	
Amount Incurred This Period <input type="text" value="2607.50"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2607.50"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="19817.11"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 13 / 345
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Data Direct, Inc.	Nature of Debt (Purpose): Computer Services
Mailing Address 181 Potomac Street PO Box 855	
City State ZIP Code Harpers WV 25425	

Outstanding Balance Beginning This Period <input type="text" value="9664.00"/>	Transaction ID: SD-6653	
Amount Incurred This Period <input type="text" value="3187.50"/>	Payment This Period <input type="text" value="3288.00"/>	Outstanding Balance at Close of This Period <input type="text" value="9563.50"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Data Center, Inc.	Nature of Debt (Purpose): Computer Services
Mailing Address 11200 Waples Mill Road Suite 100	
City State ZIP Code Fairfax VA 22030	

Outstanding Balance Beginning This Period <input type="text" value="30490.00"/>	Transaction ID: SD-6654	
Amount Incurred This Period <input type="text" value="14915.00"/>	Payment This Period <input type="text" value="30490.00"/>	Outstanding Balance at Close of This Period <input type="text" value="14915.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor David L. Andrukitis, Inc.	Nature of Debt (Purpose): Generic Cmte. Printing
Mailing Address 50 E Street, SE	
City State ZIP Code Washington DC 20003	

Outstanding Balance Beginning This Period <input type="text" value="10264.10"/>	Transaction ID: SD-6655	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="10204.88"/>	Outstanding Balance at Close of This Period <input type="text" value="59.22"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="24537.72"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor DirectAdvantage Marketing	Nature of Debt (Purpose): Committee Telemarketing
Mailing Address The Outreach Center PO Box 55043	
City State ZIP Code Boston MA 02205	

Outstanding Balance Beginning This Period 341754.84	Transaction ID: SD-6657	
Amount Incurred This Period 38837.18	Payment This Period 7775.75	Outstanding Balance at Close of This Period 372816.27

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Dixon / Davis Media Group, LLC	Nature of Debt (Purpose): Media Production
Mailing Address 1028 33rd Street, NW Suite 300	
City State ZIP Code Washington DC 20007	

Outstanding Balance Beginning This Period 186332.50	Transaction ID: SD-6658	
Amount Incurred This Period 8575.00	Payment This Period 44155.00	Outstanding Balance at Close of This Period 150752.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Dewey Square Group, LLC	Nature of Debt (Purpose): Generic Strategic Political Services
Mailing Address PO Box 60340	
City State ZIP Code Charlotte NC 28260-0340	

Outstanding Balance Beginning This Period 10005.43	Transaction ID: SD-6661	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10005.43

1) SUBTOTALS This Period This Page (optional).....	533574.20
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Eleison Group, LLC	Nature of Debt (Purpose): Generic Strategic Political Services
Mailing Address 1655 N Fort Myer Dr Suite 700	
City State ZIP Code Arlington VA 22209	

Outstanding Balance Beginning This Period 60000.00	Transaction ID: SD-6662	
Amount Incurred This Period 0.00	Payment This Period 15000.00	Outstanding Balance at Close of This Period 45000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Susan Gage Caterers, Inc.	Nature of Debt (Purpose): Generic Cmte. Events/Meetings
Mailing Address 7411 Livingston Road	
City State ZIP Code Oxon Hill MD 20745	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD-6664	
Amount Incurred This Period 6584.73	Payment This Period 0.00	Outstanding Balance at Close of This Period 6584.73

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Great American Media	Nature of Debt (Purpose): Media Buy Media Production/Ser
Mailing Address 1010 Wisconsin Ave., NW Suite 800	
City State ZIP Code Washington DC 20007	

Outstanding Balance Beginning This Period 308862.75	Transaction ID: SD-6665	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 308862.75

1) SUBTOTALS This Period This Page (optional).....	▶	360447.48
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gilbert & Wolfand, PC			Nature of Debt (Purpose): Accounting Svcs. Rendered
Mailing Address 2201 Wisconsin Avenue, NW			
City Washington	State DC	ZIP Code 20007	

Outstanding Balance Beginning This Period 4037.50		Transaction ID: SD-6666	
Amount Incurred This Period 4452.00	Payment This Period 3767.50	Outstanding Balance at Close of This Period 4722.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Global Strategy Group, LLC			Nature of Debt (Purpose): Generic Cmte. Polling
Mailing Address 895 Broadway, 5th Floor			
City New York	State NY	ZIP Code 10003	

Outstanding Balance Beginning This Period 209100.00		Transaction ID: SD-6667	
Amount Incurred This Period 0.00	Payment This Period 43000.00	Outstanding Balance at Close of This Period 166100.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Greenberg Quinlan Rosner Research, Inc.			Nature of Debt (Purpose): Generic Cmte. Polling
Mailing Address 10 G Street NE, Suite 500			
City Washington	State DC	ZIP Code 20002	

Outstanding Balance Beginning This Period 101500.00		Transaction ID: SD-6669	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 101500.00	

1) SUBTOTALS This Period This Page (optional).....	272322.00
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 17 / 345
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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Halloran Development Company, Inc.	Nature of Debt (Purpose): Generic Strategic Political Services
Mailing Address 2508 Dewitt Avenue	
City State ZIP Code Alexandria VA 22301	

Outstanding Balance Beginning This Period 14140.36	Transaction ID: SD-6671	
Amount Incurred This Period 0.00	Payment This Period 14140.36	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hyatt Regency Washington	Nature of Debt (Purpose): Generic Cmte. Events/Meetings
Mailing Address On Capitol Hill Dept 6012	
City State ZIP Code Washington DC 20042-6012	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD-6672	
Amount Incurred This Period 48153.94	Payment This Period 0.00	Outstanding Balance at Close of This Period 48153.94

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Integral Resources, Inc.	Nature of Debt (Purpose): Committee Telemarketing
Mailing Address 1972 Massachusetts Avenue	
City State ZIP Code Cambridge MA 02140	

Outstanding Balance Beginning This Period 972294.20	Transaction ID: SD-6674	
Amount Incurred This Period 270773.78	Payment This Period 252713.11	Outstanding Balance at Close of This Period 990354.87

1) SUBTOTALS This Period This Page (optional).....	▶	1038508.81
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 18 / 345
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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Joshua Roberts Photography, LLC	Nature of Debt (Purpose): Generic Cmte. Events/Meetings
Mailing Address 1217 F Street, NE	
City State ZIP Code Washington DC 20002	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD-6677	
Amount Incurred This Period 658.50	Payment This Period 0.00	Outstanding Balance at Close of This Period 658.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lexis-Nexis	Nature of Debt (Purpose): Wire Services On Line Svc-s.
Mailing Address PO Box 7247-7090	
City State ZIP Code Philadelphia PA 19170-7090	

Outstanding Balance Beginning This Period 8223.37	Transaction ID: SD-6680	
Amount Incurred This Period 4111.87	Payment This Period 8223.37	Outstanding Balance at Close of This Period 4111.87

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Liaison Capitol Hill	Nature of Debt (Purpose): Generic Cmte. Events/Meetings
Mailing Address 415 New Jersey Ave., NW	
City State ZIP Code Washington DC 20001	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD-6681	
Amount Incurred This Period 22566.99	Payment This Period 0.00	Outstanding Balance at Close of This Period 22566.99

1) SUBTOTALS This Period This Page (optional).....	▶	27337.36
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mack Crouse Group, LLC	Nature of Debt (Purpose): Printing
Mailing Address 2001 N. Beauregard Street Suite 420	
City State ZIP Code Alexandria VA 22311	

Outstanding Balance Beginning This Period 5306.00	Transaction ID: SD-6685	
Amount Incurred This Period 0.00	Payment This Period 5306.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor McMahon, Squier, Lapp and Associates	Nature of Debt (Purpose): Media Production
Mailing Address 300 N. Lee Street Suite 500	
City State ZIP Code Alexandria VA 22314	

Outstanding Balance Beginning This Period 314983.40	Transaction ID: SD-6687	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 314983.40

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Merkle Response Services, Inc.	Nature of Debt (Purpose): Computer Services
Mailing Address 100 Jamison Court	
City State ZIP Code Hagerstown MD 21740	

Outstanding Balance Beginning This Period 38565.92	Transaction ID: SD-6688	
Amount Incurred This Period 4528.35	Payment This Period 32663.54	Outstanding Balance at Close of This Period 10430.73

1) SUBTOTALS This Period This Page (optional).....	325414.13
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Meyer Associates			Nature of Debt (Purpose): Committee Telemarketing
Mailing Address 14 North Seventh Avenue			
City St. Cloud	State MN	ZIP Code 56303	

Outstanding Balance Beginning This Period <input type="text" value="19455.75"/>		Transaction ID: SD-6689	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="9553.50"/>	Outstanding Balance at Close of This Period <input type="text" value="9902.25"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Minneapolis Club			Nature of Debt (Purpose): Generic Cmte. Events/Meetings
Mailing Address 729 2nd Avenue South			
City Minneapolis	State MN	ZIP Code 55402-2463	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD-6690	
Amount Incurred This Period <input type="text" value="567.22"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="567.22"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mission Control, Inc.			Nature of Debt (Purpose): Mail Services
Mailing Address 114 A Mansfield Holow Rd.			
City Mansfield Center	State CT	ZIP Code 06250	

Outstanding Balance Beginning This Period <input type="text" value="28237.33"/>		Transaction ID: SD-6691	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="28237.33"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="38706.80"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mobile Commons	Nature of Debt (Purpose): Generic Cmte. Advertising
Mailing Address 86 Chambers St Suite 701	
City State ZIP Code New York NY 10007	

Outstanding Balance Beginning This Period 2591.19	Transaction ID: SD-6692	
Amount Incurred This Period 0.00	Payment This Period 2591.19	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Murphy Putnam Media, LLC	Nature of Debt (Purpose): Media Production
Mailing Address 901 N. Washington Street Suite 400	
City State ZIP Code Alexandria VA 22314	

Outstanding Balance Beginning This Period 180957.00	Transaction ID: SD-6693	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 180957.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor MSHC Partners Inc.	Nature of Debt (Purpose): Generic Cmte. Media Services
Mailing Address 1155 15th St NW Suite 300	
City State ZIP Code Washington DC 20005	

Outstanding Balance Beginning This Period 6250.00	Transaction ID: SD-6694	
Amount Incurred This Period 0.00	Payment This Period 6250.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	180957.00
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NCEC Services, Inc.	Nature of Debt (Purpose): Strategic/Political Services
Mailing Address 122 C Street, NW Suite 650	
City State ZIP Code Washington DC 20001	

Outstanding Balance Beginning This Period 30000.00	Transaction ID: SD-6695	
Amount Incurred This Period 15000.00	Payment This Period 15000.00	Outstanding Balance at Close of This Period 30000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NGP Software, Inc.	Nature of Debt (Purpose): Computer Services
Mailing Address 1225 Eye Street, NW Suite 1225	
City State ZIP Code Washington DC 20005	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD-6696	
Amount Incurred This Period 6600.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6600.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Occasions Caterers, Inc.	Nature of Debt (Purpose): Generic Cmte. Catering
Mailing Address 5458 3rd Street, NE	
City State ZIP Code Washington DC 20011	

Outstanding Balance Beginning This Period 16172.03	Transaction ID: SD-6698	
Amount Incurred This Period 0.00	Payment This Period 6522.31	Outstanding Balance at Close of This Period 9649.72

1) SUBTOTALS This Period This Page (optional).....	46249.72
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

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 10

NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor OMP, Inc.			Nature of Debt (Purpose): Generic Cmte. Fundraising Svcs
Mailing Address 1726 M Street, NW Suite 300			
City	State	ZIP Code	
Washington	DC	20036	

Outstanding Balance Beginning This Period		Transaction ID: SD-6701	
75441.22			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
7831.78	0.00	83273.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie			Nature of Debt (Purpose): Legal Services Rendered
Mailing Address 607 14th Street, NW Suite 800			
City	State	ZIP Code	
Washington	DC	20005	

Outstanding Balance Beginning This Period		Transaction ID: SD-6703	
246899.90			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	246899.90	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Pitney Bowes Global Financial Services LLC			Nature of Debt (Purpose): Equipment Rental/Maintenance
Mailing Address PO Box 856460			
City	State	ZIP Code	
Louisville	KY	40285	

Outstanding Balance Beginning This Period		Transaction ID: SD-6704	
4227.77			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	4227.77	0.00	

1) SUBTOTALS This Period This Page (optional).....	▶	330172.90
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Print Mail Communications			Nature of Debt (Purpose): Generic Cmte. Printing
Mailing Address 7201 Lockport Place			
City	State	ZIP Code	
Lorton	VA	22079	

Outstanding Balance Beginning This Period		Transaction ID: SD-6705	
65257.25			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
2660.15	3132.20	64785.20	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor RST Marketing Associates, Inc.			Nature of Debt (Purpose): Generic Cmte. Printing
Mailing Address Attn: Lara Burford 1272 Corporate Park Dr			
City	State	ZIP Code	
Forest	VA	24551	

Outstanding Balance Beginning This Period		Transaction ID: SD-6708	
4432.20			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	4432.20	0.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor RWT Production, LLC			Nature of Debt (Purpose): Generic Cmte. Printing
Mailing Address 5624 Bellington Avenue			
City	State	ZIP Code	
Springfield	VA	22151	

Outstanding Balance Beginning This Period		Transaction ID: SD-6710	
47228.57			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
11730.00	0.00	58958.57	

1) SUBTOTALS This Period This Page (optional).....	123743.77
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 25 / 345
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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Share Group, Inc.	Nature of Debt (Purpose): Committee Telemarketing
Mailing Address PO Box 55183	
City State ZIP Code Boston MA 02205-5183	

Outstanding Balance Beginning This Period 122584.81	Transaction ID: SD-6711	
Amount Incurred This Period 8808.21	Payment This Period 38119.50	Outstanding Balance at Close of This Period 93273.52

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Shorr Johnson Magnus Media	Nature of Debt (Purpose): Media Production
Mailing Address 1831 Chestnut St Suite 602	
City State ZIP Code Philadelphia PA 19103	

Outstanding Balance Beginning This Period 208804.58	Transaction ID: SD-6712	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 208804.58

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Strategic Marketing & Mailing, Inc.	Nature of Debt (Purpose): Mailhouse
Mailing Address Attn: Cynthia Tross 3002 N Apollo Dr	
City State ZIP Code Champaign IL 61821	

Outstanding Balance Beginning This Period 194010.56	Transaction ID: SD-6714	
Amount Incurred This Period 0.00	Payment This Period 34199.64	Outstanding Balance at Close of This Period 159810.92

1) SUBTOTALS This Period This Page (optional).....	461889.02
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 26 / 345
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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Struble Eichenbaum Communications	Nature of Debt (Purpose): Media Production
Mailing Address 700 Seventh Street, SE	
City Washington State DC ZIP Code 20003	

Outstanding Balance Beginning This Period 96571.49	Transaction ID: SD-6715	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 96571.49

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Staged Right Productions, LLC	Nature of Debt (Purpose): Generic Cmte. Events/Meetings
Mailing Address 1772 Sulphur Spring Road Suite 102	
City Baltimore State MD ZIP Code 21227	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD-6716	
Amount Incurred This Period 6932.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6932.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Staples Business Advantages	Nature of Debt (Purpose): Generic Cmte. Supplies
Mailing Address Dept DC PO Box 415256	
City Boston State MA ZIP Code 02241	

Outstanding Balance Beginning This Period 1000.87	Transaction ID: SD-6717	
Amount Incurred This Period 1049.05	Payment This Period 2049.92	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	▶	103503.49
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Triplex A Donnelley Company			Nature of Debt (Purpose): Computer Services
Mailing Address PO Box 3603			
City	State	ZIP Code	
Omaha	NE	68103	

Outstanding Balance Beginning This Period <input type="text" value="1480.66"/>		Transaction ID: SD-6719	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1480.66"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Telefund, Inc.			Nature of Debt (Purpose): Committee Telemarketing
Mailing Address Attention: Nicole Lane P.O. Box 2366			
City	State	ZIP Code	
Denver	CO	80201-2366	

Outstanding Balance Beginning This Period <input type="text" value="55672.25"/>		Transaction ID: SD-6720	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="55672.25"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Strategy Group			Nature of Debt (Purpose): Mail Services
Mailing Address 1603 Orrington Avenue Suite 1730			
City	State	ZIP Code	
Evanston	IL	60201	

Outstanding Balance Beginning This Period <input type="text" value="3000.00"/>		Transaction ID: SD-6721	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="3000.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="55672.25"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Thrifty Car Rental	Nature of Debt (Purpose): Travel
Mailing Address DTG Operations, Inc. - BOK Lockbox 2241	
City State ZIP Code Tulsa OK 74182	

Outstanding Balance Beginning This Period 14561.50	Transaction ID: SD-6722	
Amount Incurred This Period 1441.78	Payment This Period 14561.50	Outstanding Balance at Close of This Period 1441.78

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor tinyHorse Solutions LLC	Nature of Debt (Purpose): Generic Strategic Political Services
Mailing Address 1441 Rhode Island Ave., NW #214	
City State ZIP Code Washington DC 20005	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD-6723	
Amount Incurred This Period 10000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor UBS Financial Services, Inc.	Nature of Debt (Purpose): Retirement
Mailing Address 1501 K Street, NW Suite 1100	
City State ZIP Code Washington DC 20006	

Outstanding Balance Beginning This Period 29331.11	Transaction ID: SD-6731	
Amount Incurred This Period 0.00	Payment This Period 29331.11	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	11441.78
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor US Express Leasing Inc.			Nature of Debt (Purpose): Equipment Rental/Maintenance
Mailing Address Dept #1608			
City Denver	State CO	ZIP Code 80291	

Outstanding Balance Beginning This Period 10248.58		Transaction ID: SD-6727	
Amount Incurred This Period 0.00	Payment This Period 10248.58	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon Wireless			Nature of Debt (Purpose): Wireless Service
Mailing Address PO Box 25505			
City Lehigh Valley	State PA	ZIP Code 18002-5505	

Outstanding Balance Beginning This Period 6886.02		Transaction ID: SD-6729	
Amount Incurred This Period 0.00	Payment This Period 6886.02	Outstanding Balance at Close of This Period 0.00	

1) SUBTOTALS This Period This Page (optional).....	▶	0.00
2) TOTALS This Period (last page this line number only).....	▶	4800094.04
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	11500000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	16300094.04

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

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

FOR LINE NUMBER: PAGE 30 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Renate Ackermann
Mailing Address 27 Chatham Ct
City Newport Beach State CA Zip Code 92660
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 208.00
Date of Receipt 01 / 30 / 2009
Transaction ID: C5963925
Amount of Each Receipt this Period 208.00

B. Full Name (Last, First, Middle Initial)
Joan Aldous
Mailing Address 1516 Marigold Way Apt. 602
City South Bend State IN Zip Code 46617
FEC ID number of contributing federal political committee. **C**
Name of Employer Univ of Notre Dame Occupation Professor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 01 / 20 / 2009
Transaction ID: C5958984
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
William B. Alsup
Mailing Address 3019 44th St. NW
City Washington State DC Zip Code 20016
FEC ID number of contributing federal political committee. **C**
Name of Employer Hines Occupation Real Estate Development
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 01 / 09 / 2009
Transaction ID: C5943373
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 1708.00
TOTAL This Period (last page this line number only) ►

A. Form/Schedule : **SA**

Transaction ID :

Schedule A supporting Line 17 discloses payment(s) from American List Counsel, Inc. and from several individuals for goods and/or services, including equipment, supplies, personnel, advertising services, membership lists and mailing lists. These payments reflect the usual and normal charge for the lists, which have an ascertainable value. The amounts of the payments were determined by looking to the amounts paid for similar lists under normal commercial practices.

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

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

FOR LINE NUMBER: PAGE 32 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Joe A. Armel

Mailing Address 33 Bay Vista Dr

City State Zip Code
Mill Valley CA 94941

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

Name of Employer Occupation
Self-Employed Dentist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
MM / DD / YYYY
01 / 26 / 2009

Transaction ID: C5963467

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Anthony J. Augustine

Mailing Address 1029 Old Green Bay Rd.

City State Zip Code
Winnetka IL 60093

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

Name of Employer Occupation
Praire Night and Develop- Information Requested
ment Inc.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
MM / DD / YYYY
01 / 20 / 2009

Transaction ID: C5946290

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
W. Bacchus

Mailing Address 5425 20th St N

City State Zip Code
Arlington VA 22205

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

Name of Employer Occupation
N/A Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
MM / DD / YYYY
01 / 26 / 2009

Transaction ID: C5952579

Amount of Each Receipt this Period
300.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Phillip R. Bagato

Mailing Address 15309 Nevada St

City State Zip Code
Woodbridge VA 22191

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 01 / 27 / 2009
Transaction ID: C5952690
Amount of Each Receipt this Period: 300.00

B. Full Name (Last, First, Middle Initial)
Velvlee G. Bailey

Mailing Address 3628 Parkside Dr.

City State Zip Code
San Bernadino CA 92404

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 01 / 23 / 2009
Transaction ID: C5950552
Amount of Each Receipt this Period: 300.00

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

Mailing Address 38 Alcatraz Ave

City State Zip Code
Belvedere CA 94920

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

Name of Employer Fanella, Bravo & Martel Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 01 / 12 / 2009
Transaction ID: C5969936
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 850.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 345
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
John Balint

Mailing Address 7 La Grange Rd

City State Zip Code
Delmar NY 12054

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

Name of Employer Occupation
Albany Medical Center Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
01 / 26 / 2009

Transaction ID: C5947543

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
William J. Barkett

Mailing Address 7724 Prospect Pl

City State Zip Code
La Jolla CA 92037

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

Name of Employer Occupation
Merjan Financial President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 28500.00

Date of Receipt
MM / DD / YYYY
01 / 07 / 2009

Transaction ID: C5924026

Amount of Each Receipt this Period
28500.00

C.

Full Name (Last, First, Middle Initial)
Carla J. Barrett

Mailing Address 3423 Westenedge Dr.

City State Zip Code
Columbus IN 47203

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 209.00

Date of Receipt
MM / DD / YYYY
01 / 13 / 2009

Transaction ID: C5962120

Amount of Each Receipt this Period
209.00

SUBTOTAL of Receipts This Page (optional) ► **28959.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 345
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Mary E. Battle

Mailing Address 3920 13th St NW

City Washington State DC Zip Code 20011

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 01 / 20 / 2009
Transaction ID: C5959931
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Joyce Beasley

Mailing Address 5133 Valburn Ct.

City Austin State TX Zip Code 78731

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

Name of Employer Lloyd Gosselink Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 01 / 23 / 2009
Transaction ID: C5951266
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
William Becker

Mailing Address 320 E 72nd St

City New York State NY Zip Code 10021

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

Name of Employer Janus Films Co. Occupation Chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 01 / 20 / 2009
Transaction ID: C5944320
Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ► 1550.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 345
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Betsey D. Beckman

Mailing Address 16001 Larch Way

City Lynnwood State WA Zip Code 98087

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

Name of Employer Self-Employed Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 202.80

Date of Receipt: 01 / 16 / 2009
Transaction ID: C5960360
 Amount of Each Receipt this Period: 202.80

B.

Full Name (Last, First, Middle Initial)
Mildred Berg

Mailing Address 838 Santa Fe Ave

City Palo Alto State CA Zip Code 94305

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 01 / 20 / 2009
Transaction ID: C5948064
 Amount of Each Receipt this Period: 300.00

C.

Full Name (Last, First, Middle Initial)
Pradeepkumar T. Bhakta

Mailing Address 2327 Pinn Rd

City San Antonio State TX Zip Code 78227

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

Name of Employer Pinn Road Motel Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 01 / 10 / 2009
Transaction ID: C5969792
 Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► **752.80**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 345

(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Elisabeth Bicknell

Mailing Address 1130 Mount George Ave

City State Zip Code
Napa CA 94558

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

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

Transaction ID: C5947730

Amount of Each Receipt this Period

230.00

B.

Full Name (Last, First, Middle Initial)
Neal Boswell

Mailing Address 906 Pine Marsh Dr

City State Zip Code
Brunswick GA 31525

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

Name of Employer Occupation
Summit Internal Medicine Physician

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

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

Transaction ID: C5944310

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
Tim Bridge

Mailing Address 60 Robinhood Dr.

City State Zip Code
San Francisco CA 94127

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

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

Transaction ID: C5964912

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) ▶

980.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 345
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Marguerite M Brown

Mailing Address 31741 Greenbrier Ln

City State Zip Code
Hayward CA 94544

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
01 / 20 / 2009

Transaction ID: C5949083

Amount of Each Receipt this Period
230.00

B.

Full Name (Last, First, Middle Initial)
Anne M. Brownell

Mailing Address 122 Duke's County Ave.

City State Zip Code
Oak Bluffs MA 02557

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

Name of Employer Self-Employed Occupation Licensed Mental Health Counselor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
01 / 29 / 2009

Transaction ID: C5963023

Amount of Each Receipt this Period
400.00

C.

Full Name (Last, First, Middle Initial)
Pauline A. Burgher

Mailing Address 1752 North Blvd

City State Zip Code
Houston TX 77098

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
01 / 16 / 2009

Transaction ID: C5958777

Amount of Each Receipt this Period
375.00

SUBTOTAL of Receipts This Page (optional) ► **1005.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 345

(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)

Paul A. Buttenwieser

Mailing Address 200 Marsh St

City State Zip Code
Belmont MA 24782

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

Name of Employer Occupation
Self-Employed Physician

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ -5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 0 / 2 0 0 9

Transaction ID: C5942155

Amount of Each Receipt this Period

-5000.00

NSF

B.

Full Name (Last, First, Middle Initial)

Elizabeth J. Cabraser

Mailing Address 7463 Foothill Ranch Rd

City State Zip Code
Santa Rosa CA 95404

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

Name of Employer Occupation
Lief, Cabraser, Heimann & Bernstein Attorney

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 28500.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 0 / 2 0 0 9

Transaction ID: C5942128

Amount of Each Receipt this Period

28500.00

C.

Full Name (Last, First, Middle Initial)

Jeffrey Capizzano

Mailing Address 1371 E Street, SE

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation
Teaching Strategies Vice President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 9500.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 0 / 2 0 0 9

Transaction ID: C5942142

Amount of Each Receipt this Period

9500.00

SUBTOTAL of Receipts This Page (optional)

33000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 40 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
R. E. Cardenas

Mailing Address 4 Calle Anacua

City State Zip Code
Brownsville TX 78520

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

Name of Employer Self-Employed Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
01 / 23 / 2009

Transaction ID: C5951005

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Rex A. Carnes

Mailing Address 2727 Nelson Rd
Apt. G108

City State Zip Code
Longmont CO 80503

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
01 / 16 / 2009

Transaction ID: C5971215

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Elaine Carr

Mailing Address 11338 Sea Grass Cir.

City State Zip Code
Boca Raton FL 33498

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt
MM / DD / YYYY
01 / 16 / 2009

Transaction ID: C5962004

Amount of Each Receipt this Period
208.00

SUBTOTAL of Receipts This Page (optional) ► **1708.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 345
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Candace M. Carroll

Mailing Address 1939 Via Casa Alta

City State Zip Code
La Jolla CA 92037

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

Name of Employer Occupation
Sullivan Hill et al Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
01 / 28 / 2009

Transaction ID: C5963258

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Patricia L. Castro

Mailing Address 901 Madonna Way

City State Zip Code
Los Altos CA 94024

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
01 / 23 / 2009

Transaction ID: C5951257

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Chevy Chase

Mailing Address P.O. Box 257

City State Zip Code
Bedford NY 10506

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

Name of Employer Occupation
Self-Employed Writer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
01 / 14 / 2009

Transaction ID: C5968298

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► 1800.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 345

(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)

Jayni Chase

Mailing Address P.O. Box 257

City State Zip Code
Bedford NY 10506

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

Name of Employer Occupation
Self-Employed Actor

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 4 / 2 0 0 9

Transaction ID: C5971194

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Patricia Cherry

Mailing Address 6622 N Le Mai Ave

City State Zip Code
Lincolnwood IL 60712

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

Name of Employer Occupation
N/A Homemaker

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: C5969834

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

William B. Cooley

Mailing Address P.O. Box 60094

City State Zip Code
Harrisburg PA 17106

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

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

Transaction ID: C5960971

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional) ►

850.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 345
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Elizabeth M. Cospers

Mailing Address P.O. Box 2277

City State Zip Code
East Setauket NY 11733

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

Name of Employer Occupation
Cospers Environmental Svc Scientist/Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
01 / 26 / 2009

Transaction ID: C5946566

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Lois M. Curtis

Mailing Address 5789 Crystal Springs Dr NE

City State Zip Code
Bainbridge Island WA 98110

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

Name of Employer Occupation
City Of Bainbridge Island City Council Person

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
01 / 26 / 2009

Transaction ID: C5952643

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Eric Davidson

Mailing Address 2256 Brambling Ln

City State Zip Code
Pasadena CA 91107

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

Name of Employer Occupation
Caltech Scientist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
01 / 23 / 2009

Transaction ID: C5947936

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional) ► **1200.00**

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

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

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

FOR LINE NUMBER: PAGE 44 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Grant Davies

Mailing Address 4313 Bradley Lane

City State Zip Code
Chevy Chase MD 20815

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

Name of Employer Teaching Strategies Inc. Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 9500.00

Date of Receipt
MM / DD / YYYY
01 / 30 / 2009

Transaction ID: C5942141

Amount of Each Receipt this Period
9500.00

B. Full Name (Last, First, Middle Initial)
Charles J. Davilla

Mailing Address 11000 Woodruff Ave
Apt. 12

City State Zip Code
Downey CA 90241

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

Date of Receipt
MM / DD / YYYY
01 / 26 / 2009

Transaction ID: C5953790

Amount of Each Receipt this Period
675.00

C. Full Name (Last, First, Middle Initial)
Pamela S. Deal

Mailing Address P.O. Box 159

City State Zip Code
Anoka MN 55303

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
01 / 27 / 2009

Transaction ID: C5963414

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **11175.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 345
(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
							17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Barbara K Decoster

Mailing Address 17 Martha Ln

City State Zip Code
Evanston IL 60201

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
01 / 20 / 2009

Transaction ID: C5959397

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
E. J. Dieterich

Mailing Address 154 Highland Ave

City State Zip Code
Winchester MA 18902

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 505.00

Date of Receipt
MM / DD / YYYY
01 / 20 / 2009

Transaction ID: C5942260

Amount of Each Receipt this Period
505.00

C.

Full Name (Last, First, Middle Initial)
Wallace J. Dockter

Mailing Address 2301 Pine Knoll Dr Apt. 10

City State Zip Code
Walnut Creek CA 94595

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
01 / 21 / 2009

Transaction ID: C5942617

Amount of Each Receipt this Period
240.00

SUBTOTAL of Receipts This Page (optional) ► **1245.00**

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

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

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

FOR LINE NUMBER: PAGE 46 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Eileen C. Doherty
Mailing Address 3632 N Janssen Ave
City Chicago State IL Zip Code 60613
FEC ID number of contributing federal political committee. **C**
Name of Employer IBM Occupation Director, BT CIO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 01 / 22 / 2009
Transaction ID: C5968083
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Curt Dombek
Mailing Address 2641 Nichols Canyon Road
City Los Angeles State CA Zip Code 90046
FEC ID number of contributing federal political committee. **C**
Name of Employer Bryan Cave Law Offices Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2375.00
Date of Receipt 01 / 23 / 2009
Transaction ID: C5924064
Amount of Each Receipt this Period 2375.00

C. Full Name (Last, First, Middle Initial)
Julie Domenick
Mailing Address 315 C St NE
City Washington State DC Zip Code 20002
FEC ID number of contributing federal political committee. **C**
Name of Employer Multiple Strategies LLC Occupation President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 28500.00
Date of Receipt 01 / 30 / 2009
Transaction ID: C5942122
Amount of Each Receipt this Period 28500.00

SUBTOTAL of Receipts This Page (optional) ► 31125.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 47 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Lynn D. Donald

Mailing Address 401 Lake Rd

City State Zip Code
Springdale AR 72764

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

Name of Employer Occupation
Arkansas Support Network Program Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
01 / 28 / 2009

Transaction ID: C5952546

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Georgeann Dukes

Mailing Address 2511 Big Horn Ln

City State Zip Code
Richardson TX 75080

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt
MM / DD / YYYY
01 / 06 / 2009

Transaction ID: C5960147

Amount of Each Receipt this Period
208.00

C. Full Name (Last, First, Middle Initial)
Ruane A. Dunlap

Mailing Address P.O. Box 172

City State Zip Code
Circle MT 59215

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
01 / 23 / 2009

Transaction ID: C5948678

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **958.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 345

(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Marian L. Edelstein

Mailing Address 180 E Pearson St
Apt. 3801

City State Zip Code
Chicago IL 60611

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 20 / 2009

Transaction ID: C5943714

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Joanne H. Egerman

Mailing Address 77 Westcliff Rd

City State Zip Code
Weston MA 24931

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
28500.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 12 / 2009

Transaction ID: C5924043

Amount of Each Receipt this Period
28500.00

C.

Full Name (Last, First, Middle Initial)
Paul Egerman

Mailing Address 77 Westcliff Rd

City State Zip Code
Weston MA 24931

FEC ID number of contributing federal political committee. C

Name of Employer eScription, Inc. Occupation Chairman & Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
28500.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 07 / 2009

Transaction ID: C5924028

Amount of Each Receipt this Period
28500.00

SUBTOTAL of Receipts This Page (optional) 57500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 49 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Frozan E. Ehmedi

Mailing Address 16 Vanessa Ct.

City State Zip Code
Cherry Hill NJ 08003

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

Name of Employer Self-Employed Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
01 / 26 / 2009

Transaction ID: C5951901

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Carol W. Ellis

Mailing Address 7039 Encina Ln

City State Zip Code
Boca Raton FL 33433

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
MM / DD / YYYY
01 / 28 / 2009

Transaction ID: C5952687

Amount of Each Receipt this Period
330.00

C. Full Name (Last, First, Middle Initial)
Steven A. Elmendorf

Mailing Address 2301 Connecticut Avenue NW
Apt. 7b

City State Zip Code
Washington DC 20008

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

Name of Employer Elmendorf Strategies LLC Occupation Lobbyist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt
MM / DD / YYYY
01 / 26 / 2009

Transaction ID: C5942152

Amount of Each Receipt this Period
30400.00

SUBTOTAL of Receipts This Page (optional) ► **31730.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 345

(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)

J. P. Endsley

Mailing Address 7033 Fremont Ct

City State Zip Code
Indianapolis IN 46256

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

Name of Employer Occupation
N/A Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt

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

Transaction ID: C5944357

Amount of Each Receipt this Period

225.00

B.

Full Name (Last, First, Middle Initial)

Florence A. Eng

Mailing Address 135 Central Park W
Apt. 8S

City State Zip Code
New York NY 10023

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

Name of Employer Occupation
N/A Homemaker

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 30400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 0 / 2 0 0 9

Transaction ID: C5942126

Amount of Each Receipt this Period

30400.00

C.

Full Name (Last, First, Middle Initial)

L. Erlenmeyer-Kimling

Mailing Address 1 Briarwood Lane

City State Zip Code
Stamford CT 06903

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

Name of Employer Occupation
NYS Psychiatric Institute Research Director

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 0 / 2 0 0 9

Transaction ID: C5951357

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional)

31375.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 51 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Andrea M. Fallek

Mailing Address 465 Park Ave
26A

City State Zip Code
New York NY 10022

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
01 / 26 / 2009

Transaction ID: C5947428

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Clairece Feagin

Mailing Address 48 Pamela Lane

City State Zip Code
College Station TX 77845

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

Name of Employer Occupation
Self-Employed Writer

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
01 / 20 / 2009

Transaction ID: C5971029

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Lawrence K. Fielden

Mailing Address 1000 Lake St.

City State Zip Code
Salt Lake City UT 84105

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.00

Date of Receipt
MM / DD / YYYY
01 / 22 / 2009

Transaction ID: C5966031

Amount of Each Receipt this Period
208.00

SUBTOTAL of Receipts This Page (optional) ► **758.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 345
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

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

Mailing Address 138 W Hill Ter

City State Zip Code
Painted Post NY 14870

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

Name of Employer Corning Occupation Vice Chairman & CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
01 / 27 / 2009

Transaction ID: C5947725

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Lillian Forte

Mailing Address 347 Lincoln Pl Apt. 2B

City State Zip Code
Brooklyn NY 11238

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt
MM / DD / YYYY
01 / 16 / 2009

Transaction ID: C5958858

Amount of Each Receipt this Period
35.00

C.

Full Name (Last, First, Middle Initial)
Lillian Forte

Mailing Address 347 Lincoln Pl Apt. 2B

City State Zip Code
Brooklyn NY 11238

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt
MM / DD / YYYY
01 / 29 / 2009

Transaction ID: C5963197

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **1335.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 345
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Elaine S. Frank

Mailing Address 657 Hibbard Rd

City State Zip Code
Winnetka IL 60093

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
01 / 23 / 2009

Transaction ID: C5947941

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Neba V. Funiba

Mailing Address 6512 41st Ave.

City State Zip Code
Hyattsville MD 20782

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

Name of Employer USDHUD Occupation Community Planning Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
01 / 21 / 2009

Transaction ID: C5951740

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Eleanore G Gann

Mailing Address 8222 Marcie Dr

City State Zip Code
Baltimore MD 21208

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
01 / 27 / 2009

Transaction ID: C5963436

Amount of Each Receipt this Period
250.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 345
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Caroline Gaynor

Mailing Address 960 NE 78th St

City Miami State FL Zip Code 33138

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

Name of Employer Self-Employed Occupation Investments

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 23 / 2009

Transaction ID: C5947188

Amount of Each Receipt this Period 500.00

B.

Full Name (Last, First, Middle Initial)
Kenneth E. Gerber

Mailing Address 202 Maryland Dr

City Texarkana State TX Zip Code 75501

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 22 / 2009

Transaction ID: C5948979

Amount of Each Receipt this Period 300.00

C.

Full Name (Last, First, Middle Initial)
Susan A. Gibson

Mailing Address 420 E. Massachusetts Avenue

City Southern Pines State NC Zip Code 28387

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

Name of Employer N/A Occupation Student

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 351.00

Date of Receipt 01 / 12 / 2009

Transaction ID: C5968668

Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional) ► **950.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 345

(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Susan A. Gibson

Mailing Address 420 E. Massachusetts Avenue

City State Zip Code
Southern Pines NC 28387

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

Name of Employer Occupation
N/A Student

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 351.00

Date of Receipt

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

Transaction ID: C5968669

Amount of Each Receipt this Period

201.00

B.

Full Name (Last, First, Middle Initial)
Dana Gies

Mailing Address 1879 E 1700 S

City State Zip Code
Gooding ID 83330

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 7 / 2 0 0 9

Transaction ID: C5967340

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)
Elizabeth Girard

Mailing Address 14509 Brookmead Dr.

City State Zip Code
Germantown MD 20874

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

Name of Employer Occupation
N/A Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

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

Transaction ID: C5950511

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

801.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 345
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial) Thomas V. Girardi		Date of Receipt MM / DD / YYYY 01 / 26 / 2009	
Mailing Address 1126 Wilshire Blvd		Transaction ID: C5942099	
City Los Angeles	State CA	Zip Code 90017	Amount of Each Receipt this Period 25000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Girardi and Keese	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00		

B.

Full Name (Last, First, Middle Initial) Jennifer Glick		Date of Receipt MM / DD / YYYY 01 / 20 / 2009	
Mailing Address P.O. Box 1161		Transaction ID: C5960640	
City Rowlett	State TX	Zip Code 75030	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer N/A	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

C.

Full Name (Last, First, Middle Initial) Edwin L. Goldwasser		Date of Receipt MM / DD / YYYY 01 / 23 / 2009	
Mailing Address 612 W Delaware Ave		Transaction ID: C5947454	
City Urbana	State IL	Zip Code 61801	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer CA Institute Of Tech.	Occupation Physicist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional)	▶	26300.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 345
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Michael D. Griffin

Mailing Address 180 Riverside Blvd
Apt. 21E

City State Zip Code
New York NY 10069

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
28500.00

Date of Receipt
MM / DD / YYYY
01 / 09 / 2009

Transaction ID: C5924041

Amount of Each Receipt this Period
28500.00

B.

Full Name (Last, First, Middle Initial)
Jennifer Gross

Mailing Address 12230 205th St. N

City State Zip Code
Marine On Saint Cr MN 55047

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

Name of Employer Self-Employed Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
01 / 23 / 2009

Transaction ID: C5950931

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
Mary R. Guettel

Mailing Address 211 Central Park W

City State Zip Code
New York NY 10024

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

Name of Employer Self-Employed Occupation Composter

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
01 / 29 / 2009

Transaction ID: C5951105

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **29300.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 345

(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Richard J. Guggenhime

Mailing Address 1000 Mason St.
Apt. 403

City State Zip Code
San Francisco CA 94108

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

Name of Employer
Heller, Ehrman, White & McAuliff

Occupation
Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
14500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 9

Transaction ID: C5942138

Amount of Each Receipt this Period

14500.00

B.

Full Name (Last, First, Middle Initial)
Augustine V. Guillen

Mailing Address 122 Pennystone Ave.

City State Zip Code
San Antonio TX 78223

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

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

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

Transaction ID: C5951215

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)
Paul Haas

Mailing Address 873 Ferndale Ct

City State Zip Code
Bowling Green OH 43402

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

Name of Employer
N/A

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
0 1 / 1 2 / 2 0 0 9

Transaction ID: C5968241

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

15150.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 59 / 345

(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
William Hagans

Mailing Address 3200 Travis St
Fl 4

City State Zip Code
Houston TX 77006

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

Name of Employer
Hagans Burdine & Montgome-
ry

Occupation
Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
28500.00

Date of Receipt

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

Transaction ID: C5924042

Amount of Each Receipt this Period

28500.00

B.

Full Name (Last, First, Middle Initial)
Robert W. Hall

Mailing Address PO Box 309

City State Zip Code
Mooreville IN 46158

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

Name of Employer
N/A

Occupation
Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

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

Transaction ID: C5942325

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)
Kenneth E. Hamilton

Mailing Address 213 9th Ave NE

City State Zip Code
Waseca MN 56093

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

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 0 7 / 2 0 0 9

Transaction ID: C5959504

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional) ▶

28950.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 345

(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Kenneth E. Hamilton

Mailing Address 213 9th Ave NE

City	State	Zip Code
Waseca	MN	56093

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

Name of Employer Information Requested	Occupation Information Requested
--	----------------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 3 / 2 0 0 9

Transaction ID: C5959505

Amount of Each Receipt this Period
150.00

B.

Full Name (Last, First, Middle Initial)
Vivian Hannon

Mailing Address 1241 Blount Ave.

City	State	Zip Code
Guntersville	AL	35976

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

Name of Employer Information Requested	Occupation Information Requested
--	----------------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00
---	------------------------------------

Date of Receipt

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

Transaction ID: C5958222

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Clara Harari

Mailing Address 720 W End Ave
605

City	State	Zip Code
New York	NY	10025

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

Name of Employer N/A	Occupation Retired
-------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00
---	------------------------------------

Date of Receipt

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

Transaction ID: C5944365

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ▶

700.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 61 / 345
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Jda Harrington

Mailing Address P.O. Box 9808

City State Zip Code
San Rafael CA 94912

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ -500.00

Date of Receipt
MM / DD / YYYY
01 / 27 / 2009

Transaction ID: C5956364

Amount of Each Receipt this Period
-500.00

NSF

B.

Full Name (Last, First, Middle Initial)
Douglas Heidenreich

Mailing Address 11 Summit Ct. Apt. 16

City State Zip Code
Saint Paul MN 55102

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
01 / 27 / 2009

Transaction ID: C5955306

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Suzanne Herzing

Mailing Address Unit 1009

City State Zip Code
Milwaukee WI 53202

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
01 / 28 / 2009

Transaction ID: C5967069

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Alice M. Heuer
Mailing Address 2922 Druid Ln.
City Los Alamitos State CA Zip Code 90720
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 209.00
Date of Receipt 01 / 20 / 2009
Transaction ID: C5965365
Amount of Each Receipt this Period 209.00

B. Full Name (Last, First, Middle Initial)
Ira M. Heyman
Mailing Address 1014 Cragmont Ave
City Berkeley State CA Zip Code 94708
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 01 / 26 / 2009
Transaction ID: C5957012
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
H. L. Hickman
Mailing Address 2034 Castleman Dr
City Nashville State TN Zip Code 37215
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 01 / 21 / 2009
Transaction ID: C5946902
Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) ► 909.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 63 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
H. L. Hickman

Mailing Address 2034 Castleman Dr

City State Zip Code
Nashville TN 37215

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
01 / 30 / 2009

Transaction ID: C5952522

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Daniel W. Hildreth

Mailing Address 55 Thornhurst Rd

City State Zip Code
Falmouth ME 41051

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

Name of Employer Diversified Communications Occupation Businessperson

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
01 / 28 / 2009

Transaction ID: C5948505

Amount of Each Receipt this Period
500.00

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

Mailing Address 3305 Buchanan St

City State Zip Code
Wichita Falls TX 76308

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

Name of Employer Self-Employed Occupation Real Estate Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
01 / 26 / 2009

Transaction ID: C5954371

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 950.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 345
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
John K. Hoey

Mailing Address 3801 Canterbury Rd
Unit 1004

City Baltimore State MD Zip Code 21218

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

Name of Employer Projussus Therapy Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 06 / 2009

Transaction ID: C5957949

Amount of Each Receipt this Period 300.00

B.

Full Name (Last, First, Middle Initial)
David James Hogan

Mailing Address 100 United Nations Plaza
Apt. 22B

City New York State NY Zip Code 10017

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

Name of Employer Mannheim, LLC Occupation Investments

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 28500.00

Date of Receipt 01 / 07 / 2009

Transaction ID: C5924025

Amount of Each Receipt this Period 28500.00

C.

Full Name (Last, First, Middle Initial)
Jacob Hopkins

Mailing Address 666 Houston Ave
#212

City Takoma Park State MD Zip Code 20912

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 01 / 22 / 2009

Transaction ID: C5971117

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 29050.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 65 / 345

(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)

Jacob Hopkins

Mailing Address 666 Houston Ave
#212

City State Zip Code
Takoma Park MD 20912

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 3 / 2 0 0 9

Transaction ID: C5971118

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

James C. Hormel

Mailing Address 19 Sutter St

City State Zip Code
San Francisco CA 94104

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

Name of Employer Occupation
Equidex, Inc. Chairman

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 30400.00

Date of Receipt

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

Transaction ID: C5942110

Amount of Each Receipt this Period

30400.00

C.

Full Name (Last, First, Middle Initial)

Emogene Howerton

Mailing Address 164 Cypress Pt N

City State Zip Code
Deland FL 32724

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

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

Transaction ID: C5943705

Amount of Each Receipt this Period

230.00

SUBTOTAL of Receipts This Page (optional) ▶

30655.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 66 / 345
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Howard L. Hoy

Mailing Address 2624 Boyd St

City State Zip Code
Des Moines IA 50317

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

Name of Employer Occupation
IRS Revenue Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
01 / 26 / 2009

Transaction ID: C5953057

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Richard Huberman

Mailing Address 2141 P St NW
Apt. 302

City State Zip Code
Washington DC 20037

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

Name of Employer Occupation
OSHA Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
01 / 16 / 2009

Transaction ID: C5944027

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Jerusha H. Insell

Mailing Address 1193 W 12th St.

City State Zip Code
Jacksonville FL 32209

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
01 / 23 / 2009

Transaction ID: C5951870

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **750.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 345
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Margaret C. Ives

Mailing Address 130D Seminary Ave.

City State Zip Code
Auburndale MA 02466

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
01 / 20 / 2009

Transaction ID: C5946208

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Deborah J. Jackson

Mailing Address 70 Colony Ridge Dr.

City State Zip Code
Johns Creek GA 30022

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
01 / 20 / 2009

Transaction ID: C5965627

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Kathy B. Jackson, Ph. D.

Mailing Address 104 Quailview Drive

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer Access Health Solutions Partnership Occupation Partner/Doctor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 28000.00

Date of Receipt
MM / DD / YYYY
01 / 07 / 2009

Transaction ID: C5924023

Amount of Each Receipt this Period
28000.00

SUBTOTAL of Receipts This Page (optional) ► **28750.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Gilbert Jacobs

Mailing Address 20217 Wells Dr.

City State Zip Code
Woodland Hills CA 91364

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
01 / 23 / 2009

Transaction ID: C5950850

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Priscilla Joseph

Mailing Address 24 N St

City State Zip Code
Turners Falls MA 13761

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

Name of Employer Information Requested Occupation Information Requested
USDA/Foreign Agriculture Service Economist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
01 / 11 / 2009

Transaction ID: C5968175

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Patricia H. Judd

Mailing Address 1367 Via Alta

City State Zip Code
Del Mar CA 92014

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

Name of Employer Information Requested Occupation Information Requested
UCSD Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
01 / 27 / 2009

Transaction ID: C5963550

Amount of Each Receipt this Period
225.00

SUBTOTAL of Receipts This Page (optional) ► **825.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
S. L. Kaercher

Mailing Address 710 Sunnit Avenue

City State Zip Code
Havre MT 59501

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
01 / 20 / 2009

Transaction ID: C5962213

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Harry P. Kamen

Mailing Address 910 Park Ave # 65

City State Zip Code
New York NY 10021

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 28500.00

Date of Receipt
MM / DD / YYYY
01 / 07 / 2009

Transaction ID: C5924029

Amount of Each Receipt this Period
28500.00

C. Full Name (Last, First, Middle Initial)
David P. Kelleher

Mailing Address 302 N Underwood St

City State Zip Code
Falls Church VA 22046

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

Name of Employer Self-Employed Occupation Computer Programmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
01 / 20 / 2009

Transaction ID: C5944115

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► 29050.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Marion Kellogg
Mailing Address 772 Brush Hill Rd
City State Zip Code
Stowe VT 56724
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 01 / 26 / 2009
Transaction ID: C5948134
Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Linda Ketelaar
Mailing Address 224 Cureton St
City State Zip Code
Greenville SC 29605
FEC ID number of contributing federal political committee. **C**
Name of Employer Arnold Info Systems Occupation Driver
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00
Date of Receipt 01 / 26 / 2009
Transaction ID: C5952899
Amount of Each Receipt this Period 225.00

C. Full Name (Last, First, Middle Initial)
Michael S. Klein
Mailing Address P.O. Box 626
City State Zip Code
Corte Madera CA 94976
FEC ID number of contributing federal political committee. **C**
Name of Employer Modulus Guitars Occupation Owner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 28500.00
Date of Receipt 01 / 05 / 2009
Transaction ID: C5924014
Amount of Each Receipt this Period 28500.00

SUBTOTAL of Receipts This Page (optional) ► 29725.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 71 / 345
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
James E. E. Kline

Mailing Address 1500 Sheridan Rd
Unit 5G

City Wilmette State IL Zip Code 60091

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
01 / 23 / 2009

Transaction ID: C5947239

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Todd L. Koons

Mailing Address P.O. Box 1619

City Sausalito State CA Zip Code 94966

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

Name of Employer Epic Roots, Inc. Occupation Farmer/Marketer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
28500.00

Date of Receipt
MM / DD / YYYY
01 / 08 / 2009

Transaction ID: C5924034

Amount of Each Receipt this Period
28500.00

C.

Full Name (Last, First, Middle Initial)
Peter A. Kraus

Mailing Address 4906 Shadywood Ln

City Dallas State TX Zip Code 75209

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

Name of Employer Walters & Kraus LLP Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
28500.00

Date of Receipt
MM / DD / YYYY
01 / 14 / 2009

Transaction ID: C5924048

Amount of Each Receipt this Period
28500.00

SUBTOTAL of Receipts This Page (optional) ▶ **57500.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Larry L. Krummel

Mailing Address 13750 Serra Oaks Ct

City State Zip Code
Saratoga CA 95070

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

Name of Employer All My Papers Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
01 / 23 / 2009

Transaction ID: C5942432

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
Roger S. Kuhn

Mailing Address 7108 Laverock Ln
Apt. 421

City State Zip Code
Bethesda MD 20817

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
01 / 23 / 2009

Transaction ID: C5942709

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Gloria I. Kuhnhausen

Mailing Address 94 Longfellow Rd.

City State Zip Code
Mill Valley CA 94941

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
01 / 21 / 2009

Transaction ID: C5951617

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► 1100.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Gloria I. Kuhnhausen
 Mailing Address 94 Longfellow Rd.
 City State Zip Code
 Mill Valley CA 94941
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 2 3 / 2 0 0 9
Transaction ID: C5951616
 Amount of Each Receipt this Period
 75.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

B. Full Name (Last, First, Middle Initial)
John H. Lahr
 Mailing Address The New Yorker 4 Times Square
 City State Zip Code
 New York NY 10036
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 2 0 / 2 0 0 9
Transaction ID: C5950246
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Information Requested Occupation Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

C. Full Name (Last, First, Middle Initial)
William Ledger
 Mailing Address 600 Lake Dr
 City State Zip Code
 Princeton NJ 85405
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 2 0 / 2 0 0 9
Transaction ID: C5954712
 Amount of Each Receipt this Period
 400.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cornell Medical College Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

SUBTOTAL of Receipts This Page (optional) ► 725.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 74 / 345

(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Glendon T. Lee

Mailing Address 28 Terriwood Dr

City State Zip Code
Tuscaloosa AL 35401

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 208.00

Date of Receipt

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

Transaction ID: C5958214

Amount of Each Receipt this Period
208.00

B.

Full Name (Last, First, Middle Initial)
Howard Leventhal

Mailing Address 9 Sunny Ct

City State Zip Code
Somerset NJ 88735

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

Name of Employer Occupation
Rutgers 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
0 1 / 2 7 / 2 0 0 9

Transaction ID: C5946927

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Pamela Anagnos Liapakis

Mailing Address 515 E 79th St
Fl 14

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Sullivan & Liapakis Attorney

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 0 3 / 2 0 0 9

Transaction ID: C5956393

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ▶

958.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 75 / 345

(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)

Jan H. Lindelow

Mailing Address 8105 Ravello Ridge Cv

City State Zip Code
Austin TX 78735

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

Name of Employer Occupation
Self-Employed Consultant

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 7 / 2 0 0 9

Transaction ID: C5955300

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)

Joanna London

Mailing Address 3940 Langley Ct NW
Apt. E635

City State Zip Code
Washington DC 20016

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

Name of Employer Occupation
N/A Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: C5948043

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)

Tom Wallace Lyons

Mailing Address 5408 Navajo

City State Zip Code
Louisville KY 40207

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1200.00

Date of Receipt

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

Transaction ID: C5966943

Amount of Each Receipt this Period
1200.00

SUBTOTAL of Receipts This Page (optional)

1950.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Janis L. Lysen

Mailing Address 2849 42nd Avenue S

City State Zip Code
Minneapolis MN 55406

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
01 / 22 / 2009

Transaction ID: C5965156

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Thaderine D. MacFarlane

Mailing Address 965 Tournament Drive

City State Zip Code
Hillsborough CA 94010

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

Name of Employer N/A Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 28500.00

Date of Receipt
MM / DD / YYYY
01 / 30 / 2009

Transaction ID: C5942124

Amount of Each Receipt this Period
28500.00

C. Full Name (Last, First, Middle Initial)
Vincent A. Mai

Mailing Address 50 Cornwall Ln

City State Zip Code
Port Washington NY 11050

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

Name of Employer AEA Investors, Inc. Occupation Chairman & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt
MM / DD / YYYY
01 / 30 / 2009

Transaction ID: C5942139

Amount of Each Receipt this Period
30400.00

SUBTOTAL of Receipts This Page (optional) ► **59150.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 345
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Ronald M. Mankoff

Mailing Address 22 Lakeside Park
#550

City State Zip Code
Dallas TX 75225

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 2 3 / 2 0 0 9

Transaction ID: C5946812

Amount of Each Receipt this Period
400.00

B.

Full Name (Last, First, Middle Initial)
Brian Marlowe

Mailing Address 67 Bridgetown Rd

City State Zip Code
Hilton Head Island SC 29928

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 1 4 / 2 0 0 9

Transaction ID: C5968184

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
James D. Massie

Mailing Address 501 High St

City State Zip Code
Alexandria VA 22302

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

Name of Employer Alpine Group Occupation Government Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 28500.00

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

Transaction ID: C5924044

Amount of Each Receipt this Period
28500.00

SUBTOTAL of Receipts This Page (optional) ► 29200.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 78 / 345
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial) Warren E. Mathews		Date of Receipt MM / DD / YYYY 01 / 23 / 2009
Mailing Address 1010 Centinela Ave		Transaction ID: C5946898
City Santa Monica	State CA	Zip Code 90403
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.

Full Name (Last, First, Middle Initial) Jack Mawhinney		Date of Receipt MM / DD / YYYY 01 / 21 / 2009
Mailing Address 2817 Mockingbird Ct		Transaction ID: C5949029
City Annapolis	State MD	Zip Code 21401
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 218.00
Name of Employer University of Maryland	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 218.00	

C.

Full Name (Last, First, Middle Initial) Mary Anne McCarthy		Date of Receipt MM / DD / YYYY 01 / 17 / 2009
Mailing Address 2622 Laurel Ave		Transaction ID: C5968654
City Manhattan Beach	State CA	Zip Code 90266
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1218.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Nion T. McEvoy

Mailing Address 101 Jordan Ave

City State Zip Code
San Francisco CA 94118

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

Name of Employer Occupation
Chronicle Books Chairman & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 28500.00

Date of Receipt
MM / DD / YYYY
01 / 05 / 2009

Transaction ID: C5924017

Amount of Each Receipt this Period
28500.00

B. Full Name (Last, First, Middle Initial)
Michael McGinnis

Mailing Address 15222 Rainhollow Dr

City State Zip Code
Houston TX 77070

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

Name of Employer Occupation
Xserv Inc. CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
01 / 27 / 2009

Transaction ID: C5953804

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mary B. Mcmillan

Mailing Address 2925 Lincoln Dr
Apt. 713

City State Zip Code
Saint Paul MN 55113

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
01 / 26 / 2009

Transaction ID: C5952874

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 29250.00

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

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

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

FOR LINE NUMBER: PAGE 80 / 345

(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Dennis Mehiel

Mailing Address 115 Stevens Ave
Suite 105

City State Zip Code
Valhalla NY 10595

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

Name of Employer Occupation
Sweetheart Cub Co., Inc. Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
28500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	0		2	0	0	9

Transaction ID: C5942118

Amount of Each Receipt this Period
28500.00

B.

Full Name (Last, First, Middle Initial)
James Melius

Mailing Address 11 Cemetary Rd.

City State Zip Code
Copake Falls NY 12517

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt

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

Transaction ID: C5961717

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Matilda B Melnick

Mailing Address 8838 Chatsworth Dr
Apt. 1315

City State Zip Code
Houston TX 77024

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 ▼
300.00

Date of Receipt

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

Transaction ID: C5963509

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)

29050.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Rebecca S. Mericle
Mailing Address 1982 Kroupa Rd
City State Zip Code
Traverse City MI 49686
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 01 / 26 / 2009
Transaction ID: C5952892
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mary Metz
Mailing Address 811 Butternut Rd
City State Zip Code
Madison WI 53704
FEC ID number of contributing federal political committee. **C**
Name of Employer Univ of WI Madison Occupation Professor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 01 / 30 / 2009
Transaction ID: C5953322
Amount of Each Receipt this Period 300.00

C. Full Name (Last, First, Middle Initial)
Hormoz Mohtashemi
Mailing Address 516 Hamburg Turnpike Suite 11
City State Zip Code
Wayne NJ 07470
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Physician
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 01 / 27 / 2009
Transaction ID: C5963071
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 1050.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 82 / 345

(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Mark Monaldi

Mailing Address 3803 Hamilton Avenue

City State Zip Code
Baltimore MD 21206

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

Name of Employer Occupation
Penn-Mar Organization, In- Residential Assistant
c.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 3 / 2 0 0 9

Transaction ID: C5970849

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Evalyn Moore

Mailing Address 900 Hillcrest Dr

City State Zip Code
Richmond TX 77469

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

Name of Employer Occupation
Self-Employed Farmer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 7 / 2 0 0 9

Transaction ID: C5952621

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Ruth Moore

Mailing Address 4303 4th Ave NE

City State Zip Code
Seattle WA 98105

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

Name of Employer Occupation
N/A Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 230.00

Date of Receipt

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

Transaction ID: C5947866

Amount of Each Receipt this Period
230.00

SUBTOTAL of Receipts This Page (optional) ►

730.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 83 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Ken F. Mountcastle, Jr.
Mailing Address 37 Oenoke Ln
City New Canaan State CT Zip Code 68404
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 01 / 20 / 2009
Transaction ID: C5945268
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Philip R. Munger
Mailing Address 40 Fifth Avenue #11C
City New York State NY Zip Code 10011
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Policy Analyst
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 28500.00
Date of Receipt 01 / 07 / 2009
Transaction ID: C5924024
Amount of Each Receipt this Period 28500.00

C. Full Name (Last, First, Middle Initial)
Erik H. Murer
Mailing Address 720 Pine St
City Philadelphia State PA Zip Code 19106
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 01 / 30 / 2009
Transaction ID: C5947408
Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional) ► 29300.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
William K. Nisbet

Mailing Address 126 Garces Dr

City State Zip Code
San Francisco CA 94132

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 23 / 2009
Transaction ID: C5946823
Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
Dennis O'Neal

Mailing Address 1802 Granby Way

City State Zip Code
Frederick MD 21702

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

Name of Employer Norwin Technologies Occupation Technology Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ -1000.00

Date of Receipt 01 / 30 / 2009
Transaction ID: C5942156
Amount of Each Receipt this Period -1000.00
NSF

C. Full Name (Last, First, Middle Initial)
Suzanne O'Neill

Mailing Address 399 Main St.

City State Zip Code
Wakefield MA 01880

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

Name of Employer Self-Employed Occupation Shoe Repair

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 28 / 2009
Transaction ID: C5951279
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 300.00

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

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 85 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Richard Oertel

Mailing Address 6018 SW Cupola Drive

City State Zip Code
South Beach OR 97366

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
01 / 28 / 2009

Transaction ID: C5967561

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Dean Ornish

Mailing Address 900 Bridgeway Suite 2

City State Zip Code
Sausalito CA 94965

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

Name of Employer Preventive Medicine Res. Inst. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 28500.00

Date of Receipt
MM / DD / YYYY
01 / 30 / 2009

Transaction ID: C5924062

Amount of Each Receipt this Period
28500.00

C. Full Name (Last, First, Middle Initial)
Thomas G. Parachini

Mailing Address 150 W Jefferson Ave Suite 2500

City State Zip Code
Detroit MI 48226

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

Name of Employer Miller Canfield Paddock Stone Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
01 / 30 / 2009

Transaction ID: C5964073

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 29050.00

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

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

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

FOR LINE NUMBER: PAGE 86 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Diane W Parker

Mailing Address PO Box 1011

City State Zip Code
Thomasville GA 31799

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
01 / 23 / 2009

Transaction ID: C5948320

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Richard Parry

Mailing Address 9301 Copernicus Dr

City State Zip Code
Lanham MD 20706

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
01 / 21 / 2009

Transaction ID: C5946795

Amount of Each Receipt this Period
230.00

C. Full Name (Last, First, Middle Initial)
Scott Parven

Mailing Address 8817 Sleepy Hollow Lane

City State Zip Code
Potomac MD 20854

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

Name of Employer Occupation
Parven Pomper Strategies Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 28500.00

Date of Receipt
MM / DD / YYYY
01 / 08 / 2009

Transaction ID: C5924032

Amount of Each Receipt this Period
28500.00

SUBTOTAL of Receipts This Page (optional) ► **31230.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 87 / 345
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Charles Patrick, Jr.

Mailing Address 38 Church St

City Charleston State SC Zip Code 29401

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

Name of Employer Richardson Patrick Westbrook & Brickma
Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
28500.00

Date of Receipt
MM / DD / YYYY
01 / 05 / 2009

Transaction ID: C5924015

Amount of Each Receipt this Period
28500.00

B.

Full Name (Last, First, Middle Initial)
Gloria Peck

Mailing Address 2340 Delmar Dr E

City Seattle State WA Zip Code 98102

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

Name of Employer N/A
Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
01 / 23 / 2009

Transaction ID: C5946745

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Joseph B. Pereles

Mailing Address 13456 Maple Ridge Ct

City Saint Louis State MO Zip Code 63141

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

Name of Employer Drury Inss Inc.
Occupation VP Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
01 / 30 / 2009

Transaction ID: C5954863

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **29250.00**

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

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

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

FOR LINE NUMBER: PAGE 88 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Deborah Pines

Mailing Address 7 Ploughmans Bush

City State Zip Code
Bronx NY 10471

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

Name of Employer Self-Employed Occupation
Psychotherapist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
01 / 22 / 2009

Transaction ID: C5968034

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Christine Powell

Mailing Address 1226 Rue Saint Martin

City State Zip Code
San Marcos CA 92078

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

Name of Employer N/A Occupation
N/A

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
MM / DD / YYYY
01 / 23 / 2009

Transaction ID: C5950852

Amount of Each Receipt this Period
1200.00

C. Full Name (Last, First, Middle Initial)
Melretta Pratt

Mailing Address 7030 NW 28th Ave

City State Zip Code
Miami FL 33147

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

Name of Employer N/A Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
MM / DD / YYYY
01 / 23 / 2009

Transaction ID: C5950125

Amount of Each Receipt this Period
1200.00

SUBTOTAL of Receipts This Page (optional) ► 2900.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 89 / 345

(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
John S. Price

Mailing Address P.O. Box 187

City State Zip Code
Bryn Mawr PA 19010

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 23 / 2009

Transaction ID: C5949485

Amount of Each Receipt this Period 250.00

B.

Full Name (Last, First, Middle Initial)
Guerry W. Putnam

Mailing Address 1222 Lodema Ln

City State Zip Code
Duncanville TX 75116

FEC ID number of contributing federal political committee. C

Name of Employer US Treasury Occupation Federal Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 20 / 2009

Transaction ID: C5959147

Amount of Each Receipt this Period 300.00

C.

Full Name (Last, First, Middle Initial)
Doreen Quinn

Mailing Address 569 Evanswood Pl

City State Zip Code
Cincinnati OH 45220

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 15 / 2009

Transaction ID: C5944232

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) 1050.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 90 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Gomathi Ramachandran

Mailing Address 22 Longview Dr

City State Zip Code
Holmdel NJ 77331

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

Name of Employer Occupation
AT & T Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 209.00

Date of Receipt
MM / DD / YYYY
01 / 29 / 2009

Transaction ID: C5964551

Amount of Each Receipt this Period
209.00

B. Full Name (Last, First, Middle Initial)
Rudy Ramirez

Mailing Address 5444 Williams Rd

City State Zip Code
Suisun City CA 94534

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
01 / 28 / 2009

Transaction ID: C5953888

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Jose M. Ramos Gonzalez

Mailing Address 57 Pitt St.
#2

City State Zip Code
New York NY 10002

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
01 / 26 / 2009

Transaction ID: C5965291

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **959.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 91 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Anna Winter Rasmussen

Mailing Address 393 Estabrook Rd

City State Zip Code
Concord MA 17425

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 28500.00

Date of Receipt 01 / 30 / 2009
Transaction ID: C5942129
 Amount of Each Receipt this Period 28500.00

B. Full Name (Last, First, Middle Initial)
Neil E. Rasmussen

Mailing Address 393 Estabrook Rd

City State Zip Code
Concord MA 17425

FEC ID number of contributing federal political committee. C

Name of Employer APC Corp. Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 28500.00

Date of Receipt 01 / 30 / 2009
Transaction ID: C5942130
 Amount of Each Receipt this Period 28500.00

C. Full Name (Last, First, Middle Initial)
J Ronald Ratliff

Mailing Address 10748 Deerwood Park Blvd South

City State Zip Code
Jacksonville FL 32256

FEC ID number of contributing federal political committee. C

Name of Employer Reynolds, Smith and Hills Inc. Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 30 / 2009
Transaction ID: C5942112
 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) 57500.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 92 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
David A. Reichert

Mailing Address 10574 E Tamarisk Way

City State Zip Code
Scottsdale AZ 85262

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

Name of Employer N/A Occupation 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
0 1 / 2 7 / 2 0 0 9

Transaction ID: C5955740

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Joseph J. Rhoades

Mailing Address P.O. Box 874

City State Zip Code
Wilmington DE 19899

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

Name of Employer Self-Employed Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: C5958635

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Murray Richards

Mailing Address P.O. Box 1039

City State Zip Code
Ross CA 94957

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

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

Transaction ID: C5947450

Amount of Each Receipt this Period
230.00

SUBTOTAL of Receipts This Page (optional) ► 1530.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 93 / 345

(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Elizabeth Rohn

Mailing Address 4302 Hidden Links Ct.

City State Zip Code
Kingwood TX 77339

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 3 / 2 0 0 9

Transaction ID: C5962319

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
Laurence Roth

Mailing Address 35 Hub Dr

City State Zip Code
Melville NY 11747

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

Name of Employer Information Requested Occupation Information Requested
Marchon Eyewear Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
28500.00

Date of Receipt

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

Transaction ID: C5924040

Amount of Each Receipt this Period

28500.00

C.

Full Name (Last, First, Middle Initial)
Michael Ruettgers

Mailing Address 453 Bedford Rd

City State Zip Code
Carlisle MA 17411

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

Name of Employer Information Requested Occupation Information Requested
Emc Corp Businessman

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

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

Transaction ID: C5964016

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

29250.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Lisa Sardegna
 Mailing Address 435 Vassar Avenue
 City State Zip Code
Berkeley CA 94708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
Self-Employed Conservator
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 28500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 0 5 / 2 0 0 9
Transaction ID: C5924020
 Amount of Each Receipt this Period
 28500.00

B. Full Name (Last, First, Middle Initial)
Paul David Sawi
 Mailing Address 2934 Avalon Avenue
 City State Zip Code
Berkeley CA 94705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
Sonoma Vista Ranch Owner/Manager
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 28500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 3 0 / 2 0 0 9
Transaction ID: C5942117
 Amount of Each Receipt this Period
 28500.00

C. Full Name (Last, First, Middle Initial)
Gertrude Saylor
 Mailing Address 200 Herndon Ln.
 City State Zip Code
Berea KY 40403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
N/A Retired
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 2 0 / 2 0 0 9
Transaction ID: C5946012
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional) ► 57500.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 95 / 345
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
K. A. Scanlan

Mailing Address 525 Lane Pl S

City Salem State OR Zip Code 97302

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

Name of Employer Salem Radiology Consultants Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 23 / 2009

Transaction ID: C5948928

Amount of Each Receipt this Period 250.00

B.

Full Name (Last, First, Middle Initial)
Mary Schardt

Mailing Address 8 Orchard Way

City Kentfield State CA Zip Code 94904

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

Name of Employer Asian Art Museum Occupation Museum Educator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 26 / 2009

Transaction ID: C5953214

Amount of Each Receipt this Period 250.00

C.

Full Name (Last, First, Middle Initial)
Hans Schmidt

Mailing Address 15 Jones St. #6G

City New York State NY Zip Code 10014

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 01 / 15 / 2009

Transaction ID: C5945970

Amount of Each Receipt this Period 220.00

SUBTOTAL of Receipts This Page (optional) ► **720.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 96 / 345

(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Marjorie Schmiel

Mailing Address 700 John Ringling Blvd
301

City State Zip Code
Sarasota FL 34236

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
217.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 7 / 2 0 0 9

Transaction ID: C5952545

Amount of Each Receipt this Period

217.00

B.

Full Name (Last, First, Middle Initial)
Stephen F. Schneck

Mailing Address 9707 Hill St

City State Zip Code
Kensington MD 20895

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

Name of Employer Occupation
Catholic University Of America Professor

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
218.00

Date of Receipt

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

Transaction ID: C5959656

Amount of Each Receipt this Period

218.00

C.

Full Name (Last, First, Middle Initial)
Julian C. Schroeder

Mailing Address 215 W 92nd St
Apt. 8A

City State Zip Code
New York NY 10025

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

Name of Employer Occupation
Credit Renaissance Partners Investment Advisor

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
20000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 0 7 / 2 0 0 9

Transaction ID: C5924031

Amount of Each Receipt this Period

20000.00

SUBTOTAL of Receipts This Page (optional)

20435.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Ruth W. Schroeder

Mailing Address 215 W 92nd St
Apt. 8A

City State Zip Code
New York NY 10025

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
N/A Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt MM / DD / YYYY
01 / 07 / 2009

Transaction ID: C5924030

Amount of Each Receipt this Period 10000.00

B. Full Name (Last, First, Middle Initial)
Robert F. Schumann

Mailing Address P.O. Box 813

City State Zip Code
Madison CT 64430

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
N/A Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
01 / 23 / 2009

Transaction ID: C5948476

Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
W. Ford Schumann

Mailing Address 9612 E Vereda Solana Dr

City State Zip Code
Scottsdale AZ 85255

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
N/A Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
01 / 26 / 2009

Transaction ID: C5952572

Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) 12000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 98 / 345
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Mark Schutte

Mailing Address 11863 E 500 S

City State Zip Code
Zionsville IN 46077

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

Name of Employer Ms. Technology LLC Occupation President/Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
01 / 26 / 2009

Transaction ID: C5954991

Amount of Each Receipt this Period
400.00

B.

Full Name (Last, First, Middle Initial)
Bernard L. Schwartz

Mailing Address 745 5th Avenue Floor 31

City State Zip Code
New York NY 10151

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

Name of Employer BLS Investment Occupation Chairman & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt
MM / DD / YYYY
01 / 30 / 2009

Transaction ID: C5942127

Amount of Each Receipt this Period
30400.00

C.

Full Name (Last, First, Middle Initial)
Elizabeth Sherry

Mailing Address 9690 Hyde Park Dr. Unit 18 Unit 18

City State Zip Code
San Diego CA 92119

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
01 / 23 / 2009

Transaction ID: C5949732

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 31050.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Douglas Shorenstein

Mailing Address 2560 Divisadero St.

City San Francisco State CA Zip Code 94115

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

Name of Employer The Shorenstein Company Occupation Chairman & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 28500.00

Date of Receipt 01 / 14 / 2009

Transaction ID: C5924049

Amount of Each Receipt this Period 28500.00

B. Full Name (Last, First, Middle Initial)
Walter H. Shorenstein

Mailing Address 235 Montgomery St.
FL 16

City San Francisco State CA Zip Code 94104

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

Name of Employer The Shorenstein Company Occupation Founder

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 28500.00

Date of Receipt 01 / 30 / 2009

Transaction ID: C5942131

Amount of Each Receipt this Period 28500.00

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

Mailing Address 425 W Arlington Pl

City Chicago State IL Zip Code 60614

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

Name of Employer Self-Employed Occupation Residential Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 24 / 2009

Transaction ID: C5969928

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 57250.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 100 / 345
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Dinakar Singh

Mailing Address 135 Central Park W
Apt. 8S

City State Zip Code
New York NY 10023

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

Name of Employer Occupation
TPG - Axon Capital Investment Banker

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 30400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 0 / 2 0 0 9

Transaction ID: C5942125

Amount of Each Receipt this Period

30400.00

B.

Full Name (Last, First, Middle Initial)
Gerhard Skutsch

Mailing Address 216 4th Ave.
Apt. 6

City State Zip Code
San Francisco CA 94118

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

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

Transaction ID: C5965177

Amount of Each Receipt this Period

210.00

C.

Full Name (Last, First, Middle Initial)
M. B. Smith

Mailing Address 316 Escalona Dr

City State Zip Code
Santa Cruz CA 95060

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

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

Transaction ID: C5949430

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)

30835.00

TOTAL This Period (last page this line number only)

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

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Arlene Solomon
Mailing Address 5501 E El Cedral St.
City State Zip Code
Long Beach CA 90815
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00
Date of Receipt 01 / 15 / 2009
Transaction ID: C5960925
Amount of Each Receipt this Period 450.00

B. Full Name (Last, First, Middle Initial)
Star S. Soltan
Mailing Address P.O. Box 9791
City State Zip Code
Rancho Santa Fe CA 92067
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 28500.00
Date of Receipt 01 / 05 / 2009
Transaction ID: C5924016
Amount of Each Receipt this Period 28500.00

C. Full Name (Last, First, Middle Initial)
Hissam Soufi
Mailing Address P.O. Box 2267
City State Zip Code
Vacaville CA 95696
FEC ID number of contributing federal political committee. **C**
Name of Employer State of California Occupation Psychiatrist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1200.00
Date of Receipt 01 / 17 / 2009
Transaction ID: C5968554
Amount of Each Receipt this Period 1200.00

SUBTOTAL of Receipts This Page (optional) ► 30150.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 102 / 345
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Richard C. Stazesky</p> <p>Mailing Address 726 Loveville Rd</p> <hr/> <p>City State Zip Code Hockessin DE 19707</p> <hr/> <p>FEC ID number of contributing federal political committee. C</p> <hr/> <p>Name of Employer N/A Occupation Retired</p> <hr/> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">Aggregate Year-to-Date ▼ 275.00</p>	<p>Date of Receipt 01 / 20 / 2009</p> <p>Transaction ID: C5945678</p> <hr/> <p>Amount of Each Receipt this Period 250.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Richard C. Stazesky</p> <p>Mailing Address 726 Loveville Rd</p> <hr/> <p>City State Zip Code Hockessin DE 19707</p> <hr/> <p>FEC ID number of contributing federal political committee. C</p> <hr/> <p>Name of Employer N/A Occupation Retired</p> <hr/> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">Aggregate Year-to-Date ▼ 275.00</p>	<p>Date of Receipt 01 / 20 / 2009</p> <p>Transaction ID: C5959929</p> <hr/> <p>Amount of Each Receipt this Period 25.00</p>
--	--

<p>C. Full Name (Last, First, Middle Initial) Frances L. Stewart</p> <p>Mailing Address 2400 N Bell Ave # 41</p> <hr/> <p>City State Zip Code Denton TX 76209</p> <hr/> <p>FEC ID number of contributing federal political committee. C</p> <hr/> <p>Name of Employer N/A Occupation Retired</p> <hr/> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">Aggregate Year-to-Date ▼ 208.00</p>	<p>Date of Receipt 01 / 06 / 2009</p> <p>Transaction ID: C5943316</p> <hr/> <p>Amount of Each Receipt this Period 208.00</p>
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SUBTOTAL of Receipts This Page (optional)	483.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 103 / 345
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Clinton F. Stimpson

Mailing Address 5626 Lakeshore Rd

City State Zip Code
Fort Gratiot MI 48059

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

Name of Employer Occupation
Material Control Inc Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 3 / 2 0 0 9

Transaction ID: C5947397

Amount of Each Receipt this Period
1500.00

B.

Full Name (Last, First, Middle Initial)
Jon B. Streeter

Mailing Address 3125 Claremont Ave

City State Zip Code
Berkeley CA 94705

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

Name of Employer Occupation
The Bar Association of San Francisco President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 28500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 0 / 2 0 0 9

Transaction ID: C5942145

Amount of Each Receipt this Period
28500.00

C.

Full Name (Last, First, Middle Initial)
Evan L. Stroud

Mailing Address 315 Rogers St

City State Zip Code
Decatur MI 49045

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

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

Transaction ID: C5945579

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional) ▶

30350.00

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

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

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

FOR LINE NUMBER: PAGE 104 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

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

Mailing Address 7777 N Foothill Dr S

City State Zip Code
Paradise Valley AZ 85253

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

Name of Employer Occupation
Nextcare Urgent Care Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
01 / 26 / 2009

Transaction ID: C5968094

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Evelyn J. Swenson

Mailing Address 204 Walnut Ave N

City State Zip Code
Canby MN 56220

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
01 / 23 / 2009

Transaction ID: C5948371

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Roselyne C. Swig

Mailing Address 3710 Washington St

City State Zip Code
San Francisco CA 94118

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

Name of Employer Occupation
Self-Employed Community Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 28500.00

Date of Receipt
MM / DD / YYYY
01 / 22 / 2009

Transaction ID: C5924058

Amount of Each Receipt this Period
28500.00

SUBTOTAL of Receipts This Page (optional) ► 29300.00

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

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

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

FOR LINE NUMBER: PAGE 105 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Wahid A. Tadros

Mailing Address 1377 Via Di Salerno

City Pleasanton State CA Zip Code 94566

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

Name of Employer California Engineering Occupation Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 28500.00

Date of Receipt 01 / 09 / 2009
Transaction ID: C5924039
Amount of Each Receipt this Period 28500.00

B. Full Name (Last, First, Middle Initial)
John Tarasyn

Mailing Address 1106 SW Webster Ave

City Topeka State KS Zip Code 66604

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 26 / 2009
Transaction ID: C5963484
Amount of Each Receipt this Period 300.00

C. Full Name (Last, First, Middle Initial)
Lore Tenckhoff

Mailing Address 4528 E Laurel Dr NE

City Seattle State WA Zip Code 98105

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 23 / 2009
Transaction ID: C5947263
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 29800.00

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

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

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

FOR LINE NUMBER: PAGE 106 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Lynn Thommen
Mailing Address P.O. Box 1864
City State Zip Code
Sag Harbor NY 11963
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Jewish Museum Fundraiser
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt: 01 / 30 / 2009
Transaction ID: C5956836
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Homer Thrall
Mailing Address 281 W 8th St
City State Zip Code
Marysville OH 43040
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Self-Employed Analyst
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 207.00
Date of Receipt: 01 / 23 / 2009
Transaction ID: C5950279
Amount of Each Receipt this Period: 207.00

C. Full Name (Last, First, Middle Initial)
Lorraine D. Tillrock
Mailing Address 10412 S Artesian Ave
City State Zip Code
Chicago IL 60655
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
N/A Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00
Date of Receipt: 01 / 26 / 2009
Transaction ID: C5953136
Amount of Each Receipt this Period: 205.00

SUBTOTAL of Receipts This Page (optional) ► 662.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 107 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Juanita M. Timbreza

Mailing Address 59738 Kamehameha Hwy.

City State Zip Code
Haleiwa HI 96712

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	8	/	2	0	0	9

Transaction ID: C5955710

Amount of Each Receipt this Period
400.00

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

Mailing Address 516 Patterson St.

City State Zip Code
Nashville TN 37211

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	3	/	2	0	0	9

Transaction ID: C5951302

Amount of Each Receipt this Period
400.00

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

Mailing Address 34 Pasture Ln

City State Zip Code
Darien CT 68205

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

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

Transaction ID: C5963594

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

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

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

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

FOR LINE NUMBER: PAGE 108 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Alvin Von Auw
Mailing Address 73 Pearl St
City Middletown State CT Zip Code 64573
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 01 / 26 / 2009
Transaction ID: C5963657
Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
Scott Walter
Mailing Address 1705 Millwright Ct.
City Raleigh State NC Zip Code 27614
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 01 / 09 / 2009
Transaction ID: C5968478
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
James Waugh
Mailing Address 19 Driftwood Ln
City Scarborough State ME Zip Code 40748
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 01 / 29 / 2009
Transaction ID: C5946564
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1300.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 109 / 345
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Ben Wessels

Mailing Address 16 Linden Hill Dr.

City State Zip Code
Crescent Springs KY 41017

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

Name of Employer Occupation
Self-Employed Builder

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 3000.00

Date of Receipt

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

Transaction ID: C5966948

Amount of Each Receipt this Period
3000.00

B.

Full Name (Last, First, Middle Initial)
Lyndell Wheeler

Mailing Address 246 CAYUGA DRIVE

City State Zip Code
CADIZ KY 42211

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

Name of Employer Occupation
N/A Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 7 / 2 0 0 9

Transaction ID: C5971387

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Christopher Whittington

Mailing Address 3933 Mimosa St.

City State Zip Code
Baton Rouge LA 70808

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: C5965938

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 110 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Hays H. William

Mailing Address 55 S Flower St

City Lakewood State CO Zip Code 80226

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 01 / 29 / 2009
Transaction ID: C5952367
 Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
A. B. Wolfgang

Mailing Address 96 Hope Valley Rd

City Amston State CT Zip Code 62311

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

Name of Employer Self-Employed Occupation Potter

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 01 / 30 / 2009
Transaction ID: C5942623
 Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial)
Earl K. Wood

Mailing Address 1705 Canton St

City Orlando State FL Zip Code 32803

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

Name of Employer Orange County Florida Occupation Tax Collector

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 01 / 21 / 2009
Transaction ID: C5946777
 Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ► 1100.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 111 / 345
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Srilata A. Zaheer

Mailing Address 16617 Black Oaks Ln

City State Zip Code
Wayzata MN 55391

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

Name of Employer Occupation
Univ of Minnesota Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
01 / 13 / 2009

Transaction ID: C5958707

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Dzevad Zulic

Mailing Address 1359 Reeve St. Apt. 6

City State Zip Code
Santa Clara CA 95050

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

Name of Employer Occupation
Walmart.Com Office Service

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
01 / 23 / 2009

Transaction ID: C5950853

Amount of Each Receipt this Period
450.00

C.

Full Name (Last, First, Middle Initial)
R & S Associates Family LLC

Mailing Address 333 Pine Street Suite 204

City State Zip Code
San Francisco CA 94104

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4650.00

Date of Receipt
MM / DD / YYYY
01 / 26 / 2009

Transaction ID: C5942100

Amount of Each Receipt this Period
4650.00

LLC - Members below if itemized. Permissible funds.

SUBTOTAL of Receipts This Page (optional) ► **5400.00**

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

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

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

FOR LINE NUMBER: PAGE 112 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Christine H. Russell

Mailing Address 333 Pine Street
Suite 204

City State Zip Code
San Francisco CA 94104

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

Name of Employer Occupation
R & S Associates Family Partner
LLC

Receipt For:
 Primary General
 Other (specify) ▼

Date of Receipt

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

Transaction ID: C5923303

Amount of Each Receipt this Period

4650.00

[MEMO ITEM]
Partner - R & S Associates
Family LLC

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	1263613.80

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 113 / 345
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
American Academy of Dermatologists Association PAC

Mailing Address 1350 I St NW
Suite 870

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00359539

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt
MM / DD / YYYY
01 / 21 / 2009

Transaction ID: C5924056

Amount of Each Receipt this Period
15000.00

B. Full Name (Last, First, Middle Initial)
American Association for Justice Political Action Committee

Mailing Address 1050 31st St NW

City Washington State DC Zip Code 20007

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt
MM / DD / YYYY
01 / 30 / 2009

Transaction ID: C5942115

Amount of Each Receipt this Period
15000.00

C. Full Name (Last, First, Middle Initial)
American Council of Life Insurers PAC

Mailing Address 101 Constitution Ave NW
Suite 700

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00147066

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
01 / 30 / 2009

Transaction ID: C5942113

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► 35000.00

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

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

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

FOR LINE NUMBER: PAGE 114 / 345
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)

American Crystal Sugar PAC

Mailing Address 101 3rd St N

City State Zip Code
Moorhead MN 56560

FEC ID number of contributing federal political committee. **C** C00110338

Name of Employer Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

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

Transaction ID: C5924045

Amount of Each Receipt this Period

15000.00

B.

Full Name (Last, First, Middle Initial)

American Federation of State County & Municipal Employees - PEOPLE

Mailing Address 1625 L St NW

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 7 / 2 0 0 9

Transaction ID: C5942104

Amount of Each Receipt this Period

15000.00

C.

Full Name (Last, First, Middle Initial)

American Medical Association PAC

Mailing Address 25 Massachusetts Ave NW
Suite 600

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00000422

Name of Employer Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 3 / 2 0 0 9

Transaction ID: C5942096

Amount of Each Receipt this Period

15000.00

SUBTOTAL of Receipts This Page (optional) ▶

45000.00

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

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

Use separate schedule(s)
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Detailed Summary Page

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(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
AmeriPAC: The Fund for a Greater America

Mailing Address 1850 K St NW
Suite 850

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00271338

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 3 0 / 2 0 0 9

Transaction ID: C5942158

Amount of Each Receipt this Period
15000.00

B. Full Name (Last, First, Middle Initial)
AT&T Federal

Mailing Address 1401 I St NW
Suite 1100

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 2 7 / 2 0 0 9

Transaction ID: C5942105

Amount of Each Receipt this Period
15000.00

C. Full Name (Last, First, Middle Initial)
BAE Systems USA PAC (BAE Systems North Amer Inc. PAC)

Mailing Address 1300 17th St N
Suite 1400

City State Zip Code
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00281212

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 3 0 / 2 0 0 9

Transaction ID: C5942153

Amount of Each Receipt this Period
15000.00

SUBTOTAL of Receipts This Page (optional) ► **45000.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 116 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Blank Rome LLP PAC

Mailing Address 600 New Hampshire Ave NW

City State Zip Code
Washington DC 20037

FEC ID number of contributing federal political committee. **C** C00150797

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 3 0 / 2 0 0 9

Transaction ID: C5942120

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Blue Shield of California PAC

Mailing Address 50 Beale Street
18-105

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C** C00340364

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 3 0 / 2 0 0 9

Transaction ID: C5942121

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Burlington Northern RAILPAC

Mailing Address P.O. Box 961039

City State Zip Code
Fort Worth TX 76161

FEC ID number of contributing federal political committee. **C** C00235739

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 2 8 / 2 0 0 9

Transaction ID: C5942108

Amount of Each Receipt this Period
15000.00

SUBTOTAL of Receipts This Page (optional) ► **25000.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 117 / 345
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Citizens for Altmire

Mailing Address P.O. Box 1776

City State Zip Code
Freedom PA 15042

FEC ID number of contributing federal political committee. **C** C00413310

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
01 / 14 / 2009

Transaction ID: C5924053

Amount of Each Receipt this Period
5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Courtney for Congress

Mailing Address P.O. Box 1372

City State Zip Code
Vernon CT 60665

FEC ID number of contributing federal political committee. **C** C00410233

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
01 / 06 / 2009

Transaction ID: C5924022

Amount of Each Receipt this Period
10000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Credit Union Legislative Action Council of CUNA

Mailing Address P.O. Box 576

City State Zip Code
Washington DC 20044

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
01 / 22 / 2009

Transaction ID: C5924068

Amount of Each Receipt this Period
15000.00

SUBTOTAL of Receipts This Page (optional) ► **30000.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 118 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Drive Educational and Legislative Fund

Mailing Address 25 Louisiana Ave NW

City State Zip Code
Washington DC 20001

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 1 4 / 2 0 0 9

Transaction ID: C5924050

Amount of Each Receipt this Period
15000.00

B. Full Name (Last, First, Middle Initial)
Employees of Northrop Grumman Corp PAC (ENGPAC)

Mailing Address 1000 Wilson Blvd
Suite 2300

City State Zip Code
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 2 7 / 2 0 0 9

Transaction ID: C5942106

Amount of Each Receipt this Period
15000.00

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

Mailing Address 1800 Century Park East

City State Zip Code
Los Angeles CA 90067

FEC ID number of contributing federal political committee. **C** C00393298

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 3 0 / 2 0 0 9

Transaction ID: C5942154

Amount of Each Receipt this Period
10000.00

SUBTOTAL of Receipts This Page (optional) ► **40000.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 119 / 345
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
IBEW - COPE

Mailing Address 900 7th St NW

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
01 / 14 / 2009

Transaction ID: C5924051

Amount of Each Receipt this Period
15000.00

B. Full Name (Last, First, Middle Initial)
Independent Community Bankers PAC

Mailing Address 1615 L St NW
Suite 900

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
01 / 13 / 2009

Transaction ID: C5924047

Amount of Each Receipt this Period
15000.00

C. Full Name (Last, First, Middle Initial)
Independent Insurance Agents of America Inc. PAC

Mailing Address 412 1st St SE
Suite 300

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
01 / 22 / 2009

Transaction ID: C5924059

Amount of Each Receipt this Period
15000.00

SUBTOTAL of Receipts This Page (optional) ► **45000.00**

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

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

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Investment Company Institute PAC

Mailing Address 1401 H St NW
1200

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00366310

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

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

Transaction ID: C5924060

Amount of Each Receipt this Period

15000.00

B.

Full Name (Last, First, Middle Initial)
JBDS Federal PAC

Mailing Address 633 3rd Avenue
16th Floor

City State Zip Code
New York NY 10017

FEC ID number of contributing federal political committee. **C** C00409086

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2771.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 0 / 2 0 0 9

Transaction ID: C5942107

Amount of Each Receipt this Period

2771.71

C.

Full Name (Last, First, Middle Initial)
K&L Gates LLP PAC

Mailing Address 1601 K Street NW

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00213173

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 0 / 2 0 0 9

Transaction ID: C5942119

Amount of Each Receipt this Period

15000.00

SUBTOTAL of Receipts This Page (optional)

32771.71

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 121 / 345
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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Medco Health PAC

Mailing Address 591 Redwood Hwy. #4000
MAIL STOP E3-13

City Mill Valley State CA Zip Code 94941

FEC ID number of contributing federal political committee. **C** C00384362

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 3 0 / 2 0 0 9

Transaction ID: C5942134

Amount of Each Receipt this Period
15000.00

B. Full Name (Last, First, Middle Initial)
Microsoft Corporation PAC

Mailing Address 16011 NE 36th Way
97017

City Redmond State WA Zip Code 98052

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

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

Transaction ID: C5924057

Amount of Each Receipt this Period
15000.00

C. Full Name (Last, First, Middle Initial)
National Association of Health Underwriters PAC

Mailing Address 2000 14th St N
Suite 450

City Arlington State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C** C00283135

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 2 8 / 2 0 0 9

Transaction ID: C5942109

Amount of Each Receipt this Period
10000.00

SUBTOTAL of Receipts This Page (optional) ► 40000.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
National Committee to Preserve Social Security and Medicare Federal PAC

Mailing Address 10 G St NE
Suite 600

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00172296

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
01 / 23 / 2009

Transaction ID: C5942097

Amount of Each Receipt this Period
15000.00

B. Full Name (Last, First, Middle Initial)
National Venture Capital Association PAC

Mailing Address 1655 Fort Myer Dr
Suite 850

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00150367

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
01 / 22 / 2009

Transaction ID: C5924067

Amount of Each Receipt this Period
15000.00

C. Full Name (Last, First, Middle Initial)
NEMPAC National Emergency Medicine PAC

Mailing Address P.O. Box 619911

City Dallas State TX Zip Code 75261

FEC ID number of contributing federal political committee. **C** C00140061

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
01 / 30 / 2009

Transaction ID: C5942094

Amount of Each Receipt this Period
15000.00

SUBTOTAL of Receipts This Page (optional) ► **45000.00**

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

**SCHEDULE A (FEC Form 3X)
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Use separate schedule(s)
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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
New York Life Insurance Company PAC
Mailing Address 51 Madison Ave
City New York State NY Zip Code 10010
FEC ID number of contributing federal political committee. **C** C00158881
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 15000.00
Date of Receipt 01 / 22 / 2009
Transaction ID: C5924066
Amount of Each Receipt this Period 15000.00

B. Full Name (Last, First, Middle Initial)
Norfolk Southern Corp. Good Govt Fund
Mailing Address 3 Commercial Pl
City Norfolk State VA Zip Code 23510
FEC ID number of contributing federal political committee. **C** C00009282
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 15000.00
Date of Receipt 01 / 30 / 2009
Transaction ID: C5942140
Amount of Each Receipt this Period 15000.00

C. Full Name (Last, First, Middle Initial)
Office and Professional Employees International Union-Voice of the Electorate
Mailing Address 1660 L St NW Suite 801
City Washington State DC Zip Code 20036
FEC ID number of contributing federal political committee. **C** C00007898
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 15000.00
Date of Receipt 01 / 27 / 2009
Transaction ID: C5942103
Amount of Each Receipt this Period 15000.00

SUBTOTAL of Receipts This Page (optional) ► 45000.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 124 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Political Action Committee of the American Association of Orthopaedic Surgeons
 Mailing Address 317 Massachusetts Ave NE
 City State Zip Code
 Washington DC 20002
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 2 7 / 2 0 0 9
Transaction ID: C5942101
 Amount of Each Receipt this Period
 15000.00
 FEC ID number of contributing federal political committee. **C** C00343137
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

B. Full Name (Last, First, Middle Initial)
Price Waterhouse Coopers PAC
 Mailing Address 1301 K St NW
 City State Zip Code
 Washington DC 20005
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 2 1 / 2 0 0 9
Transaction ID: C5924055
 Amount of Each Receipt this Period
 15000.00
 FEC ID number of contributing federal political committee. **C** C00107235
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

C. Full Name (Last, First, Middle Initial)
Progress Energy Employees' Federal PAC
 Mailing Address P.O. Box 1510
 City State Zip Code
 Raleigh NC 27602
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 2 7 / 2 0 0 9
Transaction ID: C5942102
 Amount of Each Receipt this Period
 15000.00
 FEC ID number of contributing federal political committee. **C** C00091884
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

SUBTOTAL of Receipts This Page (optional) ► 45000.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
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Use separate schedule(s)
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FOR LINE NUMBER: PAGE 125 / 345
(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)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Realtors PAC National Association of Realtors
Mailing Address 700 11th St NW

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 2 3 / 2 0 0 9

Transaction ID: C5942095

Amount of Each Receipt this Period
15000.00

B. Full Name (Last, First, Middle Initial)
SEIU PAC
Mailing Address 1313 L St NW

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00004036

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 3 0 / 2 0 0 9

Transaction ID: C5942114

Amount of Each Receipt this Period
15000.00

C. Full Name (Last, First, Middle Initial)
United Transportation Union PAC
Mailing Address 14600 Detroit Ave

City State Zip Code
Cleveland OH 44107

FEC ID number of contributing federal political committee. **C** C00001636

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

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

Transaction ID: C5924061

Amount of Each Receipt this Period
15000.00

SUBTOTAL of Receipts This Page (optional) ► **45000.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Vanguard Committee For Responsible Government

Mailing Address 400 Devon Park Dr

City State Zip Code
Wayne PA 19087

FEC ID number of contributing federal political committee. **C** C00410266

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
M M / D D / Y Y Y Y
0 1 / 3 0 / 2 0 0 9

Transaction ID: C5942132

Amount of Each Receipt this Period
15000.00

SUBTOTAL of Receipts This Page (optional)	▶	15000.00
TOTAL This Period (last page this line number only)	▶	532771.71

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 127 / 345
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Debbie Wasserman Schultz for Congress
Mailing Address 1071 Twin Branch Ln
City Weston State FL Zip Code 33326
FEC ID number of contributing federal political committee. **C** C00385773
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 50000.00
Date of Receipt 01 / 08 / 2009
Transaction ID: C5924037
Amount of Each Receipt this Period 50000.00
Unlimited Transfer from Principal Campaign Cmte.

B. Full Name (Last, First, Middle Initial)
Larson for Congress
Mailing Address 29 Ruff Cir
City Glastonbury State CT Zip Code 60331
FEC ID number of contributing federal political committee. **C** C00330142
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 50000.00
Date of Receipt 01 / 14 / 2009
Transaction ID: C5924052
Amount of Each Receipt this Period 50000.00
Unlimited Transfer from Principal Campaign Cmte.

C. Full Name (Last, First, Middle Initial)
Friends of Congressman George Miller
Mailing Address 20 Park Rd Suite E
City Burlingame State CA Zip Code 94010
FEC ID number of contributing federal political committee. **C** C00026757
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 100000.00
Date of Receipt 01 / 21 / 2009
Transaction ID: C5924054
Amount of Each Receipt this Period 100000.00
Unlimited Transfer from Principal Campaign Cmte.

SUBTOTAL of Receipts This Page (optional) ► 200000.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 128 / 345
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Becerra For Congress
Mailing Address P.O. Box 261060
City Los Angeles State CA Zip Code 90026
FEC ID number of contributing federal political committee. **C** C00264101
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 100000.00
Date of Receipt 01 / 22 / 2009
Transaction ID: C5924070
Amount of Each Receipt this Period 100000.00
Unlimited Transfer from Principal Campaign Cmte.

B. Full Name (Last, First, Middle Initial)
Congressman Waxman Campaign Committee
Mailing Address 6380 Wilshire Blvd Suite 1612
City Los Angeles State CA Zip Code 90048
FEC ID number of contributing federal political committee. **C** C00013128
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 100000.00
Date of Receipt 01 / 22 / 2009
Transaction ID: C5924069
Amount of Each Receipt this Period 100000.00
Unlimited Transfer from Principal Campaign Cmte.

C. Full Name (Last, First, Middle Initial)
Anna Eshoo for Congress
Mailing Address 555 Capitol Mall Suite 1425
City Sacramento State CA Zip Code 95814
FEC ID number of contributing federal political committee. **C** C00258475
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 50000.00
Date of Receipt 01 / 30 / 2009
Transaction ID: C5942137
Amount of Each Receipt this Period 50000.00
Unlimited Transfer from Principal Campaign Cmte.

SUBTOTAL of Receipts This Page (optional) ► 250000.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 129 / 345
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Braley for Congress
Mailing Address P.O. Box 390
City Waterloo State IA Zip Code 50704
FEC ID number of contributing federal political committee. **C** C00409441
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 75000.00
Date of Receipt 01 / 30 / 2009
Transaction ID: C5942149
Amount of Each Receipt this Period 75000.00
Unlimited Transfer from Principal Campaign Cmte.

B. Full Name (Last, First, Middle Initial)
Hoyer for Congress Committee
Mailing Address 7905 Malcolm Rd Suite 102
City Clinton State MD Zip Code 20735
FEC ID number of contributing federal political committee. **C** C00140715
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 85000.00
Date of Receipt 01 / 30 / 2009
Transaction ID: C5942157
Amount of Each Receipt this Period 85000.00
Unlimited Transfer from Principal Campaign Cmte.

C. Full Name (Last, First, Middle Initial)
Mike Thompson for Congress
Mailing Address 5429 Madison Ave
City Sacramento State CA Zip Code 95841
FEC ID number of contributing federal political committee. **C** C00326363
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 110000.00
Date of Receipt 01 / 30 / 2009
Transaction ID: C5942111
Amount of Each Receipt this Period 110000.00
Unlimited Transfer from Principal Campaign Cmte.

SUBTOTAL of Receipts This Page (optional) ► 270000.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 130 / 345
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Nancy Pelosi for Congress

Mailing Address 235 Montgomery St
Suite 610

City State Zip Code
San Francisco CA 94104

FEC ID number of contributing federal political committee. **C** C00213512

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 3 0 / 2 0 0 9

Transaction ID: C5942116

Amount of Each Receipt this Period
100000.00

Unlimited Transfer from Principal Campaign Cmte.

B. Full Name (Last, First, Middle Initial)
Beth Barefoot

Mailing Address 815 Maryland Ave NE
Apt. 205

City State Zip Code
Washington DC 20002

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

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

Transaction ID: SA17-861027

Amount of Each Receipt this Period
220.00

Sale of Cmte Equipment

This payment reflects the fair market value paid to the committee by a third party vendor.

C. Full Name (Last, First, Middle Initial)
Amanda Kohn

Mailing Address 7746 Wolford Way

City State Zip Code
Lorton VA 22079

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

Name of Employer 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 1 / 1 6 / 2 0 0 9

Transaction ID: SA17-861025

Amount of Each Receipt this Period
250.00

Sale of Cmte Equipment

This payment reflects the fair market value paid to the committee by a third party vendor.

SUBTOTAL of Receipts This Page (optional) ► **100470.00**

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

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

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

FOR LINE NUMBER: PAGE 131 / 345
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Robert Fenity
 Mailing Address 2732 Ordway Street NW #6
 City Washington State DC Zip Code 20008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00
 Date of Receipt 01 / 16 / 2009
Transaction ID: SA17-861026
 Amount of Each Receipt this Period 275.00
 Sale of Cmte Equipment
 This payment reflects the fair market value paid to the committee by a third party vendor.

B. Full Name (Last, First, Middle Initial)
American List Counsel, Inc.
 Mailing Address P.O. Box 32189
 City Hartford State CT Zip Code 06150-2189
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 21543.93
 Date of Receipt 01 / 23 / 2009
Transaction ID: SA17-861019
 Amount of Each Receipt this Period 14507.92
 Generic Cmte. List Rental
 This payment reflects the usual and normal charge for rental of list(s).

C. Full Name (Last, First, Middle Initial)
Lila Rose
 Mailing Address 1531 North Pierce Street #811
 City Arlington State VA Zip Code 22209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00
 Date of Receipt 01 / 27 / 2009
Transaction ID: SA17-861028
 Amount of Each Receipt this Period 500.00
 Sale of Cmte Equipment
 This payment reflects the fair market value paid to the committee by a third party vendor.

SUBTOTAL of Receipts This Page (optional) ► 15282.92
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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(check only one)

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
American List Counsel, Inc.
Mailing Address P.O. Box 32189

City State Zip Code
Hartford CT 06150-2189

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
21543.93

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 3 0 / 2 0 0 9

Transaction ID: SA17-861018

Amount of Each Receipt this Period
7036.01

Generic Cmte. List Rental

This payment reflects the usual and normal charge for rental of list(s).

B. Full Name (Last, First, Middle Initial)
Political Development Group, Inc.
Mailing Address 499 South Capitol Street, SW
Suite 114

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 3 0 / 2 0 0 9

Transaction ID: SA17-861029

Amount of Each Receipt this Period
650.00

Sale of Cmte Equipment

This payment reflects the fair market value paid to the committee by a third party vendor.

C. Full Name (Last, First, Middle Initial)
Bank of America, NA
Mailing Address 730 15th Street, NW

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1.17

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 9

Transaction ID: SA17-861030

Amount of Each Receipt this Period
1.17

Interest

SUBTOTAL of Receipts This Page (optional) ► **7687.18**

TOTAL This Period (last page this line number only) ► **843440.10**

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

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

FOR LINE NUMBER: PAGE 133 / 345
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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Amanda Kohn
Mailing Address 7746 Wolford Way
City Lorton State VA Zip Code 22079
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 16.45
Date of Receipt 01 / 08 / 2009
Transaction ID: SA15-861123
Amount of Each Receipt this Period 16.45
REIMBURSEMENT Postage
This reimbursement reflects the actual cost incurred by the committee for this expense.

B. Full Name (Last, First, Middle Initial)
Kristie Mark
Mailing Address 2226 Decatur Place, NW
City Washington State DC Zip Code 20008
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4.61
Date of Receipt 01 / 08 / 2009
Transaction ID: SA15-861037
Amount of Each Receipt this Period 4.61
REIMBURSEMENT Postage
This reimbursement reflects the actual cost incurred by the committee for this expense.

C. Full Name (Last, First, Middle Initial)
Cmte to Elect Chris Murphy
Mailing Address P.O. Box 127
City Chesire State CT Zip Code 06410
FEC ID number of contributing federal political committee. **C** C00411660
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 53.00
Date of Receipt 01 / 27 / 2009
Transaction ID: SA15-861022
Amount of Each Receipt this Period 53.00
REIMBURSEMENT Postage
This reimbursement reflects the actual cost incurred by the committee for this expense.

SUBTOTAL of Receipts This Page (optional) ► 74.06
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s)
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial)
Bret Wask
Mailing Address 224 Gretna Green Court
City State Zip Code
Alexandria VA 22304
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 9.76
Date of Receipt 01 / 27 / 2009
Transaction ID: SA15-861023
Amount of Each Receipt this Period 9.76
REIMBURSEMENT Travel
This reimbursement reflects the actual cost incurred by the committee for this expense.

B. Full Name (Last, First, Middle Initial)
United States Postal Service
Mailing Address 30th Street Station
City State Zip Code
Philadelphia PA 19104
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10129.00
Date of Receipt 01 / 29 / 2009
Transaction ID: SA15-861021
Amount of Each Receipt this Period 6272.00
REIMBURSEMENT Postage
This reimbursement reflects the actual cost incurred by the committee for this expense.

C. Full Name (Last, First, Middle Initial)
United States Postal Service
Mailing Address 30th Street Station
City State Zip Code
Philadelphia PA 19104
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10129.00
Date of Receipt 01 / 29 / 2009
Transaction ID: SA15-861020
Amount of Each Receipt this Period 3857.00
REIMBURSEMENT Postage
This reimbursement reflects the actual cost incurred by the committee for this expense.

SUBTOTAL of Receipts This Page (optional) ► 10138.76
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Pace Butler

Mailing Address 13915 N. Harvey Avenue

City State Zip Code
Edmond OK 73013

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
198.50

Date of Receipt
 M M / D D / Y Y Y Y
 0 1 / 3 0 / 2 0 0 9

Transaction ID: SA15-861024

Amount of Each Receipt this Period
198.50

REIMBURSEMENT Supplies

This payment reflects the fair market value paid to the committee by a third party vendor.

SUBTOTAL of Receipts This Page (optional)	▶	198.50
TOTAL This Period (last page this line number only)	▶	10411.32

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bank of America, NA</p> <p>Mailing Address 730 15th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860877</p> <p>Date of Disbursement 01 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 2031.35</p> <p>001 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bank of America, NA</p> <p>Mailing Address 730 15th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860878</p> <p>Date of Disbursement 01 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 1039.99</p> <p>001 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Bank of America, NA</p> <p>Mailing Address 730 15th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860958</p> <p>Date of Disbursement 01 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3096.34

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Bank of America, NA	Transaction ID: SB21B-860952 Date of Disbursement 01 / 02 / 2009
	Mailing Address 730 15th Street, NW	Amount of Each Disbursement this Period 5.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Generic Cmte. Bank Fees	001 Category/ Type
	Candidate Name	
	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.	Full Name (Last, First, Middle Initial) Bank of America, NA	Transaction ID: SB21B-860953 Date of Disbursement 01 / 02 / 2009
	Mailing Address 730 15th Street, NW	Amount of Each Disbursement this Period 460.95
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Generic Cmte. Bank Fees	001 Category/ Type
	Candidate Name	
	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:	
C.	Full Name (Last, First, Middle Initial) Bank of America, NA	Transaction ID: SB21B-860959 Date of Disbursement 01 / 02 / 2009
	Mailing Address 730 15th Street, NW	Amount of Each Disbursement this Period 25.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Generic Cmte. Bank Fees	001 Category/ Type
	Candidate Name	
	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:	

SUBTOTAL of Disbursements This Page (optional) ▶

490.95

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

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Automatic Data Processing</p> <p>Mailing Address 11411 Red Run Blvd.</p> <p>City Owings Mills State MD Zip Code 21117</p> <p>Purpose of Disbursement Computer Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860163</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="51.50"/></p>
<p>B. Full Name (Last, First, Middle Initial) Bank of America, NA</p> <p>Mailing Address 730 15th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860960</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="37.45"/></p>
<p>C. Full Name (Last, First, Middle Initial) Auburn Quad, Inc.</p> <p>Mailing Address P.O. Box 390728</p> <p>City Cambridge State MA Zip Code 02139</p> <p>Purpose of Disbursement Generic Cmte. Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860460</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1.98"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="90.93"/>
TOTAL 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Action Mailers, Inc.</p> <p>Mailing Address 90 Commerce Drive</p> <p>City Aston State PA Zip Code 19014</p> <p>Purpose of Disbursement Generic Cmte. Postage/Delivery</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860056</p> <p>Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 37000.00</p> <p>001 Category/Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bank of America, NA</p> <p>Mailing Address 730 15th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860883</p> <p>Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 210.72</p> <p>001 Category/Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Bank of America, NA</p> <p>Mailing Address 730 15th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860884</p> <p>Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 115.69</p> <p>001 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

37326.41

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

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bank of America, NA</p> <p>Mailing Address 730 15th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860885</p> <p>Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 38.07</p> <p>001 Category/Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bank of America, NA</p> <p>Mailing Address 730 15th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860879</p> <p>Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 2497.29</p> <p>001 Category/Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Bank of America, NA</p> <p>Mailing Address 730 15th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860880</p> <p>Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 348.50</p> <p>001 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2883.86

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

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bank of America, NA</p> <p>Mailing Address 730 15th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860881</p> <p>Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 256.42</p> <p>001 Category/Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bank of America, NA</p> <p>Mailing Address 730 15th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860882</p> <p>Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 251.72</p> <p>001 Category/Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Bank of America, NA</p> <p>Mailing Address 730 15th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860926</p> <p>Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 73.86</p> <p>001 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

582.00

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

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Bank of America, NA Mailing Address 730 15th Street, NW City Washington State DC Zip Code 20005 Purpose of Disbursement Generic Cmte. Bank Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860957 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 9	Amount of Each Disbursement this Period 20.00
B.	Full Name (Last, First, Middle Initial) Pacific Parking Services, Inc. Mailing Address 2404 Plyers Mill Road City Silver Spring State MD Zip Code 20902 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860057 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 9	Amount of Each Disbursement this Period 570.00
C.	Full Name (Last, First, Middle Initial) Bank of America, NA Mailing Address 730 15th Street, NW City Washington State DC Zip Code 20005 Purpose of Disbursement Generic Cmte. Bank Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860954 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 9	Amount of Each Disbursement this Period 381.60

SUBTOTAL of Disbursements This Page (optional) ▶

971.60

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bank of America, NA</p> <p>Mailing Address 730 15th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860955</p> <p>Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 21.10</p> <p>001 Category/Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bank of America, NA</p> <p>Mailing Address 730 15th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860961</p> <p>Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 20.00</p> <p>001 Category/Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) CHS Mailing, Inc.</p> <p>Mailing Address 12006 Old Baltimore Pike</p> <p>City Beltsville State MD Zip Code 20705</p> <p>Purpose of Disbursement Generic Cmte. Postage/Delivery</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860158</p> <p>Date of Disbursement 01 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 2373.00</p> <p>001 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2414.10

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Print Mail Communications</p> <p>Mailing Address 7201 Lockport Place</p> <p>City Lorton State VA Zip Code 22079</p> <p>Purpose of Disbursement Generic Cmte. Postage/Delivery</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860159 Date of Disbursement 01 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 43.68</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Print Mail Communications</p> <p>Mailing Address 7201 Lockport Place</p> <p>City Lorton State VA Zip Code 22079</p> <p>Purpose of Disbursement Generic Cmte. Postage/Delivery</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860160 Date of Disbursement 01 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 487.91</p> <p>001 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) United Parcel Service</p> <p>Mailing Address PO Box 7247-0244</p> <p>City Philadelphia State PA Zip Code 19170-0001</p> <p>Purpose of Disbursement Generic Cmte. Delivery Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860373 Date of Disbursement 01 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 37.23</p> <p>Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

568.82

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) United Parcel Service</p> <p>Mailing Address PO Box 7247-0244</p> <p>City Philadelphia State PA Zip Code 19170-0001</p> <p>Purpose of Disbursement Generic Cmte. Delivery Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860374</p> <p>Date of Disbursement 01 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 209.87</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) United Parcel Service</p> <p>Mailing Address PO Box 7247-0244</p> <p>City Philadelphia State PA Zip Code 19170-0001</p> <p>Purpose of Disbursement Generic Cmte. Delivery Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860375</p> <p>Date of Disbursement 01 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 82.67</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) United Parcel Service</p> <p>Mailing Address PO Box 7247-0244</p> <p>City Philadelphia State PA Zip Code 19170-0001</p> <p>Purpose of Disbursement Generic Cmte. Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860376</p> <p>Date of Disbursement 01 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 15.23</p>

SUBTOTAL of Disbursements This Page (optional) ▶

307.77

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Congressional Quarterly Inc. Mailing Address 1255 22nd Street NW City Washington State DC Zip Code 20077 Purpose of Disbursement Generic Cmte. Publications Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860377 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 7 / 2 0 0 9	Amount of Each Disbursement this Period 7629.75
B.	Full Name (Last, First, Middle Initial) Southwest Distribution, Inc. Mailing Address PO Box 70244 City Washington State DC Zip Code 20024 Purpose of Disbursement Generic Cmte. Publications Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860378 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 7 / 2 0 0 9	Amount of Each Disbursement this Period 908.44
C.	Full Name (Last, First, Middle Initial) Bulletin News Circulation Department Mailing Address 11190 Sunrise Valley Drive Suite 130 City Reston State VA Zip Code 20191 Purpose of Disbursement Generic Cmte. Publications Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860379 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 7 / 2 0 0 9	Amount of Each Disbursement this Period 4995.00

SUBTOTAL of Disbursements This Page (optional) ▶

13533.19

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

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

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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Joseph Jakuta	Transaction ID: SB21B-860400 Date of Disbursement 01 / 08 / 2009
	Mailing Address 2022 Englewood Avenue	Amount of Each Disbursement this Period 40.00
	City Durham State NC Zip Code 27705	
	Purpose of Disbursement Generic Cmte. OnLine Services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Deliveries Plus, Inc.	Transaction ID: SB21B-860401 Date of Disbursement 01 / 08 / 2009
	Mailing Address PO Box 45013	Amount of Each Disbursement this Period 56.36
	City Somerville State MA Zip Code 02145	
	Purpose of Disbursement Generic Cmte. Delivery Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Deliveries Plus, Inc.	Transaction ID: SB21B-860402 Date of Disbursement 01 / 08 / 2009
	Mailing Address PO Box 45013	Amount of Each Disbursement this Period 56.36
	City Somerville State MA Zip Code 02145	
	Purpose of Disbursement Generic Cmte. Delivery Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

152.72

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) Deliveries Plus, Inc. <hr/> Mailing Address PO Box 45013 <hr/> City Somerville State MA Zip Code 02145 <hr/> Purpose of Disbursement Generic Cmte. Delivery Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860403 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 56.36
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Deliveries Plus, Inc. <hr/> Mailing Address PO Box 45013 <hr/> City Somerville State MA Zip Code 02145 <hr/> Purpose of Disbursement Generic Cmte. Delivery Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860404 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 56.36
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Keynote Systems, Inc. -Lockbox <hr/> Mailing Address Dept. 33407 P.O. Box 39000 <hr/> City San Francisco State CA Zip Code 94139-3407 <hr/> Purpose of Disbursement Internet Development Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860405 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 52.18
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	164.90
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Premiere Political Communications, LLC</p> <p>Mailing Address 4616 Fessenden Street, NW</p> <p>City Washington State DC Zip Code 20016</p> <p>Purpose of Disbursement List Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860406 Date of Disbursement 01 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 4328.00</p>
<p>B. Full Name (Last, First, Middle Initial) All Stage & Sound Inc.</p> <p>Mailing Address 21500 Laytonsville Road</p> <p>City Laytonsville State MD Zip Code 20882</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860407 Date of Disbursement 01 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 3491.75</p>
<p>C. Full Name (Last, First, Middle Initial) AT & T</p> <p>Mailing Address P.O. Box 13148</p> <p>City Newark State NJ Zip Code 07101-5648</p> <p>Purpose of Disbursement Computer Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860408 Date of Disbursement 01 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 3032.54</p>

SUBTOTAL of Disbursements This Page (optional) ▶

10852.29

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) AT & T	Transaction ID: SB21B-860409
	Mailing Address P.O. Box 13148	Date of Disbursement 01 / 08 / 2009
	City Newark State NJ Zip Code 07101-5648	Amount of Each Disbursement this Period 3032.54
	Purpose of Disbursement Computer Services	Category/Type
	Candidate Name	
	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.	Full Name (Last, First, Middle Initial) AVF Consulting, Inc.	Transaction ID: SB21B-860410
	Mailing Address 1220-C Joppa Road Suite 514	Date of Disbursement 01 / 08 / 2009
	City Baltimore State MD Zip Code 21286	Amount of Each Disbursement this Period 82.50
	Purpose of Disbursement Computer Services	Category/Type
	Candidate Name	
	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:	

C.	Full Name (Last, First, Middle Initial) Lauren Dikis	Transaction ID: SB21B-860411
	Mailing Address 3105 11th St., NW	Date of Disbursement 01 / 08 / 2009
	City Washington State DC Zip Code 20010	Amount of Each Disbursement this Period 79.98
	Purpose of Disbursement Telephones	Category/Type 001
	Candidate Name	
	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:	

SUBTOTAL of Disbursements This Page (optional)	3195.02
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) DrinkMore Delivery, Inc.</p> <p>Mailing Address 7595 A-Rickenbacker Drive</p> <p>City Gaithersburg State MD Zip Code 20879</p> <p>Purpose of Disbursement Equipment Rental/Maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860412</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="12.69"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>B. Full Name (Last, First, Middle Initial) Matthew Dungan-Abney</p> <p>Mailing Address 9512 Ament Street</p> <p>City Silver Spring State MD Zip Code 20910</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860413</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="48.30"/></p> <p>Category/Type: <input type="text" value="002"/></p>
<p>C. Full Name (Last, First, Middle Initial) Diana Fassbender</p> <p>Mailing Address 1629 Columbia Rd NW Apt 630</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Telephones</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860414</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="80.00"/></p> <p>Category/Type: <input type="text" value="001"/></p>

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)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: SB21B-860415 Date of Disbursement
	Mailing Address PO Box 371461	<input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City Pittsburgh State PA Zip Code 15250-7461	Amount of Each Disbursement this Period
	Purpose of Disbursement Generic Cmte. Delivery Expense	<input type="text" value="65.99"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: SB21B-860416 Date of Disbursement
	Mailing Address PO Box 371461	<input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City Pittsburgh State PA Zip Code 15250-7461	Amount of Each Disbursement this Period
	Purpose of Disbursement Generic Cmte. Delivery Expense	<input type="text" value="23.30"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jessica Forrester	Transaction ID: SB21B-860417 Date of Disbursement
	Mailing Address 19958 Valley View Drive	<input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City Topang State CA Zip Code 90290	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel	<input type="text" value="31.35"/>
	Candidate Name	Category/Type <input type="text" value="002"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="120.64"/>
TOTAL 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Samantha Gross</p> <p>Mailing Address 10605 Concord Street Suite 202</p> <p>City Kensington State MD Zip Code 20895</p> <p>Purpose of Disbursement Generic Cmte. Fundraising Svcs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860418</p> <p>Date of Disbursement 01 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 6000.00</p>
<p>B. Full Name (Last, First, Middle Initial) JustinBradley</p> <p>Mailing Address 1725 I Street, NW Suite 300</p> <p>City Washington State DC Zip Code 20006</p> <p>Purpose of Disbursement Generic Cmte. Temporary Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860420</p> <p>Date of Disbursement 01 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 1876.25</p>
<p>C. Full Name (Last, First, Middle Initial) Melissa Kurek</p> <p>Mailing Address 1741 U St NW Apt 1</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860421</p> <p>Date of Disbursement 01 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 35.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

7911.25

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Jason O'Malley Mailing Address 7 Conestoga Road City Lancaster State PA Zip Code 17603 Purpose of Disbursement Generic Cmte. Fundraising Svcs Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860422 Date of Disbursement 01 / 08 / 2009 Amount of Each Disbursement this Period 3000.00 Category/ Type
B.	Full Name (Last, First, Middle Initial) Eric Pilch Mailing Address Darnell 617, Box 573203 Georgetown University City Washington State DC Zip Code 20057 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860424 Date of Disbursement 01 / 08 / 2009 Amount of Each Disbursement this Period 48.75 002 Category/ Type
C.	Full Name (Last, First, Middle Initial) Kelly Polce Mailing Address 1725 New Hampshire Ave., NW Apt #303 City Washington State DC Zip Code 20009 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860425 Date of Disbursement 01 / 08 / 2009 Amount of Each Disbursement this Period 356.40 002 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

3405.15

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Staples Business Advantages <hr/> Mailing Address Dept DC PO Box 415256 <hr/> City Boston State MA Zip Code 02241 <hr/> Purpose of Disbursement Generic Cmte. Supplies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860426 Date of Disbursement 01 / 08 / 2009 <hr/> Amount of Each Disbursement this Period 714.79
B.	Full Name (Last, First, Middle Initial) Staples Business Advantages <hr/> Mailing Address Dept DC PO Box 415256 <hr/> City Boston State MA Zip Code 02241 <hr/> Purpose of Disbursement Generic Cmte. Supplies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860427 Date of Disbursement 01 / 08 / 2009 <hr/> Amount of Each Disbursement this Period 166.16
C.	Full Name (Last, First, Middle Initial) Staples Business Advantages <hr/> Mailing Address Dept DC PO Box 415256 <hr/> City Boston State MA Zip Code 02241 <hr/> Purpose of Disbursement Generic Cmte. Supplies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860428 Date of Disbursement 01 / 08 / 2009 <hr/> Amount of Each Disbursement this Period 119.92

SUBTOTAL of Disbursements This Page (optional) ▶	1000.87
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 25505 City Lehigh Valley State PA Zip Code 18002-5505 Purpose of Disbursement Wireless Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860429 Date of Disbursement 01 / 08 / 2009 Amount of Each Disbursement this Period 3523.97 001 Category/ Type
B.	Full Name (Last, First, Middle Initial) Bret Wask Mailing Address 224 Gretna Green Court City Alexandria State VA Zip Code 22304 Purpose of Disbursement Telephones Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860431 Date of Disbursement 01 / 08 / 2009 Amount of Each Disbursement this Period 196.98 001 Category/ Type
C.	Full Name (Last, First, Middle Initial) Pitney Bowes, Inc. Mailing Address P.O. Box 856390 City Louisville State KY Zip Code 40285-6390 Purpose of Disbursement Generic Cmte. Postage/Delivery Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860573 Date of Disbursement 01 / 08 / 2009 Amount of Each Disbursement this Period 5000.00 001 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

8720.95

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Automatic Data Processing</p> <p>Mailing Address 11411 Red Run Blvd.</p> <p>City Owings Mills State MD Zip Code 21117</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860494</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="13143.21"/></p>
<p>B. Full Name (Last, First, Middle Initial) Automatic Data Processing</p> <p>Mailing Address 11411 Red Run Blvd.</p> <p>City Owings Mills State MD Zip Code 21117</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860493</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2448.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Automatic Data Processing</p> <p>Mailing Address 11411 Red Run Blvd.</p> <p>City Owings Mills State MD Zip Code 21117</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860495</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="152.00"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="15743.21"/>
TOTAL 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 158 / 345

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Automatic Data Processing</p> <p>Mailing Address 11411 Red Run Blvd.</p> <p>City Owings Mills State MD Zip Code 21117</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860496</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="672.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) Johanna Berkson</p> <p>Mailing Address 7710 Woodmont Ave #805</p> <p>City Bethesda State MD Zip Code 20814</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860476</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3474.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Brian L Wolff</p> <p>Mailing Address 1443 Q Street, NW</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860477</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="11908.79"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="16054.79"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Adam Goldberg Mailing Address 2151 California Street, NW Apt. 203 City Washington State DC Zip Code 20008 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860478 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 8 / 2 0 0 9	Amount of Each Disbursement this Period 3474.00
B.	Full Name (Last, First, Middle Initial) Hillary Clinton for President Mailing Address 1825 K Street NW #1000 City Washington State DC Zip Code 20006 Purpose of Disbursement Internet Development Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860459 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 9	Amount of Each Disbursement this Period 274297.45
C.	Full Name (Last, First, Middle Initial) Action Mailers, Inc. Mailing Address 90 Commerce Drive City Aston State PA Zip Code 19014 Purpose of Disbursement Generic Cmte. Postage/Delivery Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860461 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 9	Amount of Each Disbursement this Period 144300.75

SUBTOTAL of Disbursements This Page (optional)	422072.20
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Emily Sokolski Mailing Address 4123 Arkansas Ave., NW City Washington State DC Zip Code 20011 Purpose of Disbursement Stipend Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860469 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 9 Amount of Each Disbursement this Period 324.00
B.	Full Name (Last, First, Middle Initial) Dell Business Credit Mailing Address Payment Processing Center PO Box 5275 City Carol Stream State IL Zip Code 60197 Purpose of Disbursement Generic Cmte. Processing Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860470 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 9 Amount of Each Disbursement this Period 2.30
C.	Full Name (Last, First, Middle Initial) Dell Business Credit Mailing Address Payment Processing Center PO Box 5275 City Carol Stream State IL Zip Code 60197 Purpose of Disbursement Generic Cmte. Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860471 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 9 Amount of Each Disbursement this Period 169.73

SUBTOTAL of Disbursements This Page (optional) ▶

496.03

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Commonwealth Digital Office Solutions</p> <p>Mailing Address 21205 Ridgetop Circle</p> <p>City Sterling State VA Zip Code 20166-6501</p> <p>Purpose of Disbursement Copying</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860483</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="589.36"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Commonwealth Digital Office Solutions</p> <p>Mailing Address 21205 Ridgetop Circle</p> <p>City Sterling State VA Zip Code 20166-6501</p> <p>Purpose of Disbursement Copying</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860484</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="51.26"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Commonwealth Digital Office Solutions</p> <p>Mailing Address 21205 Ridgetop Circle</p> <p>City Sterling State VA Zip Code 20166-6501</p> <p>Purpose of Disbursement Copying</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860485</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="322.94"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="963.56"/>
TOTAL 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Commonwealth Digital Office Solutions	Transaction ID: SB21B-860488
	Mailing Address 21205 Ridgetop Circle	Date of Disbursement MM / DD / YYYY 01 / 13 / 2009
	City Sterling State VA Zip Code 20166-6501	Amount of Each Disbursement this Period 58.10
	Purpose of Disbursement Copying	Category/Type
	Candidate Name	
	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.	Full Name (Last, First, Middle Initial) Commonwealth Digital Office Solutions	Transaction ID: SB21B-860489
	Mailing Address 21205 Ridgetop Circle	Date of Disbursement MM / DD / YYYY 01 / 13 / 2009
	City Sterling State VA Zip Code 20166-6501	Amount of Each Disbursement this Period 10.08
	Purpose of Disbursement Generic Cmte. Processing Fees	Category/Type
	Candidate Name	
	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:	

C.	Full Name (Last, First, Middle Initial) Commonwealth Digital Office Solutions	Transaction ID: SB21B-860490
	Mailing Address 21205 Ridgetop Circle	Date of Disbursement MM / DD / YYYY 01 / 13 / 2009
	City Sterling State VA Zip Code 20166-6501	Amount of Each Disbursement this Period 30.06
	Purpose of Disbursement Copying	Category/Type
	Candidate Name	
	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:	

SUBTOTAL of Disbursements This Page (optional)	98.24
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Commonwealth Digital Office Solutions</p> <p>Mailing Address 21205 Ridgetop Circle</p> <p>City Sterling State VA Zip Code 20166-6501</p> <p>Purpose of Disbursement Generic Cmte. Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860491</p> <p>Date of Disbursement 01 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 30.24</p>
<p>B. Full Name (Last, First, Middle Initial) DC Treasurer</p> <p>Mailing Address PO Box 679 Ben Franklin Station</p> <p>City Washington State DC Zip Code 20044</p> <p>Purpose of Disbursement Use Tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860492</p> <p>Date of Disbursement 01 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 317.02</p>
<p>C. Full Name (Last, First, Middle Initial) Greenline Data, Inc.</p> <p>Mailing Address 40 W. Conchran Street Suite 212</p> <p>City Simi Valley State CA Zip Code 93065</p> <p>Purpose of Disbursement Generic Cmte. Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860499</p> <p>Date of Disbursement 01 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 358.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

705.26

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 164 / 345

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Greenline Data, Inc.

Transaction ID: SB21B-860500
Date of Disbursement

Mailing Address 40 W. Conchran Street
Suite 212

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	0	9

City State Zip Code
Simi Valley CA 93065

Amount of Each Disbursement this Period

341.26

Purpose of Disbursement
Generic Cmte. Supplies

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Robin Lyttle

Transaction ID: SB21B-860501
Date of Disbursement

Mailing Address PO Box 301

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	0	9

City State Zip Code
Basye VA 22810

Amount of Each Disbursement this Period

19899.75

Purpose of Disbursement
Generic Cmte. Events/Meetings

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

See Attached Memo Entry

C.

Full Name (Last, First, Middle Initial)
Lighting By Lyttle

Transaction ID: SB21B-860501-10000
Date of Disbursement

Mailing Address P. O. Box 301

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	7		2	0	0	9

City State Zip Code
Basye VA 22810

Amount of Each Disbursement this Period

19899.75

Purpose of Disbursement
Generic Cmte. Events/Meetings

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)

20241.01

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Bon Jovi Tours, Inc.

Transaction ID: SB21B-860502
Date of Disbursement

Mailing Address c/o Gudvi Sussman & Oppenheim
1222 16th Avenue S., 3rd Floor

MM / DD / YYYY
01 / 14 / 2009

City Nashville State TN Zip Code 37212

Amount of Each Disbursement this Period

8853.77

Purpose of Disbursement
Generic Cmte. Events/Meetings

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Print Mail Communications

Transaction ID: SB21B-860504
Date of Disbursement

Mailing Address 7201 Lockport Place

MM / DD / YYYY
01 / 15 / 2009

City Lorton State VA Zip Code 22079

Amount of Each Disbursement this Period

281.18

Purpose of Disbursement
Generic Cmte. Postage/Delivery

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Bank of America, NA

Transaction ID: SB21B-860956
Date of Disbursement

Mailing Address 730 15th Street, NW

MM / DD / YYYY
01 / 15 / 2009

City Washington State DC Zip Code 20005

Amount of Each Disbursement this Period

2435.21

Purpose of Disbursement
Generic Cmte. Bank Fees

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

11570.16

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) William Morris Agency, LLC</p> <p>Mailing Address One William Morris Place</p> <p>City Beverly Hills State CA Zip Code 90212</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860505</p> <p>Date of Disbursement 01 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 10000.00</p> <p>Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Bank of America, NA</p> <p>Mailing Address 730 15th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860962</p> <p>Date of Disbursement 01 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 16.38</p> <p>Category/Type 001</p>
<p>C. Full Name (Last, First, Middle Initial) American List Counsel, Inc.</p> <p>Mailing Address P.O. Box 32189</p> <p>City Hartford State CT Zip Code 06150-2189</p> <p>Purpose of Disbursement Generic Cmte. List Exchange</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860529</p> <p>Date of Disbursement 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 80.27</p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

10096.65

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) American List Counsel, Inc.</p> <p>Mailing Address P.O. Box 32189</p> <p>City Hartford State CT Zip Code 06150-2189</p> <p>Purpose of Disbursement Generic Cmte. List Exchange</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860530 Date of Disbursement 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 80.00</p>
<p>B. Full Name (Last, First, Middle Initial) American List Counsel, Inc.</p> <p>Mailing Address P.O. Box 32189</p> <p>City Hartford State CT Zip Code 06150-2189</p> <p>Purpose of Disbursement List Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860531 Date of Disbursement 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 1899.55</p>
<p>C. Full Name (Last, First, Middle Initial) American List Counsel, Inc.</p> <p>Mailing Address P.O. Box 32189</p> <p>City Hartford State CT Zip Code 06150-2189</p> <p>Purpose of Disbursement List Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860532 Date of Disbursement 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 2017.05</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3996.60

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Avalanche Services	Transaction ID: SB21B-860533 Date of Disbursement 01 / 16 / 2009
	Mailing Address 515-B Industrial Blvd	Amount of Each Disbursement this Period 552.50
	City Kearneysville State WV Zip Code 25430	
	Purpose of Disbursement Generic Cmte. Printing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Avalanche Services	Transaction ID: SB21B-860534 Date of Disbursement 01 / 16 / 2009
	Mailing Address 515-B Industrial Blvd	Amount of Each Disbursement this Period 575.00
	City Kearneysville State WV Zip Code 25430	
	Purpose of Disbursement Generic Cmte. Printing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Emily Sokolski	Transaction ID: SB21B-860520 Date of Disbursement 01 / 16 / 2009
	Mailing Address 4123 Arkansas Ave., NW	Amount of Each Disbursement this Period 216.00
	City Washington State DC Zip Code 20011	
	Purpose of Disbursement Stipend	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ► 1343.50

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Drew Altizer</p> <p>Mailing Address 1949 Green Street #2</p> <p>City San Francisco State CA Zip Code 94123</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860521</p> <p>Date of Disbursement 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 624.00</p>
<p>B. Full Name (Last, First, Middle Initial) Drew Altizer</p> <p>Mailing Address 1949 Green Street #2</p> <p>City San Francisco State CA Zip Code 94123</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860522</p> <p>Date of Disbursement 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 600.00</p>
<p>C. Full Name (Last, First, Middle Initial) ASAP Printing and Graphics</p> <p>Mailing Address 2805 Mount Vernon Avenue</p> <p>City Alexandria State VA Zip Code 22301</p> <p>Purpose of Disbursement Generic Cmte. Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860523</p> <p>Date of Disbursement 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 147.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1371.00

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Government News Network GovNet</p> <p>Mailing Address P.O. Box 2041</p> <p>City Trenton State NJ Zip Code 08607</p> <p>Purpose of Disbursement Generic Cmte. Publications</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860524</p> <p>Date of Disbursement 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 125.00</p> <p>Category/Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Lexis-Nexis</p> <p>Mailing Address PO Box 7247-7090</p> <p>City Philadelphia State PA Zip Code 19170-7090</p> <p>Purpose of Disbursement Wire Services On Line Svcs.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860525</p> <p>Date of Disbursement 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 4111.77</p> <p>Category/Type 001</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Quick Messenger Service of DC, Inc.</p> <p>Mailing Address 4829 Fairmont Avenue Suite B</p> <p>City Bethesda State MD Zip Code 20814-6096</p> <p>Purpose of Disbursement Generic Cmte. Delivery Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860526</p> <p>Date of Disbursement 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 106.08</p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4342.85

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Laura D'Andrea Tyson

Mailing Address 2015 Los Angeles Avenue

City Berkley State CA Zip Code 94707

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B-860528
Date of Disbursement

01 / 16 / 2009

Amount of Each Disbursement this Period

272.90

B.

Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address P.O. Box 53155

City Phoenix State AZ Zip Code 85072-3155

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B-860535
Date of Disbursement

01 / 16 / 2009

Amount of Each Disbursement this Period

1557.00

See Attached Memo Entry

C.

Full Name (Last, First, Middle Initial)
Continental

Mailing Address 1600 Smith Street

City Houston State TX Zip Code 77002

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B-860535-10000
Date of Disbursement

12 / 17 / 2008

Amount of Each Disbursement this Period

679.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional) ▶

1829.90

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) American Air</p> <p>Mailing Address 4333 Amon Carter Boulevard</p> <p>City Fort Worth State TX Zip Code 74063</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860535-20000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="439.00"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) American Air</p> <p>Mailing Address 4333 Amon Carter Boulevard</p> <p>City Fort Worth State TX Zip Code 74063</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860535-30000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="439.00"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Generic Cmte. Publications</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860536</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="19.95"/></p> <p>See Attached Memo Entry</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="19.95"/>
TOTAL 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Newslibrary.com</p> <p>Mailing Address 397 Main Street</p> <p>City Chester State VT Zip Code 05143</p> <p>Purpose of Disbursement Generic Cmte. Publications</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860536-10000 Date of Disbursement 12 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 19.95</p> <p>[MEMO ITEM] Memo Entry</p>
<p>B. Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860537 Date of Disbursement 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 29.00</p> <p>See Attached Memo Entry</p>
<p>C. Full Name (Last, First, Middle Initial) Bank Of America</p> <p>Mailing Address 100 North Tryon Street</p> <p>City Charlotte State NC Zip Code 28202</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860537-10000 Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 29.00</p> <p>[MEMO ITEM] Memo Entry</p>

SUBTOTAL of Disbursements This Page (optional)	29.00
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860538</p> <p>Date of Disbursement 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 6443.38</p> <p>See Attached Memo Entry</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Tortilla Coast</p> <p>Mailing Address 400 1st Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860538-10000</p> <p>Date of Disbursement 12 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 34.28</p> <p>[MEMO ITEM] Memo Entry</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Sonoma</p> <p>Mailing Address 223 Penn Ave, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860538-20000</p> <p>Date of Disbursement 12 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 79.30</p> <p>[MEMO ITEM] Memo Entry</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6443.38

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Hyatt Regency Washington</p> <p>Mailing Address 400 New Jersey Avenue N.W.</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860538-30000</p> <p>Date of Disbursement 12 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 6289.80</p> <p>[MEMO ITEM] Memo Entry</p>
<p>B. Full Name (Last, First, Middle Initial) Pizza Boli's</p> <p>Mailing Address 417 8th Street</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860538-40000</p> <p>Date of Disbursement 12 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 40.00</p> <p>[MEMO ITEM] Memo Entry</p>
<p>C. Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Generic Cmte. Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860539</p> <p>Date of Disbursement 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 523.37</p> <p>See Attached Memo Entry</p>

SUBTOTAL of Disbursements This Page (optional) ▶

523.37

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Personnel Concepts</p> <p>Mailing Address P.O. Box 9003</p> <p>City San Dimas State CA Zip Code 91761</p> <p>Purpose of Disbursement Generic Cmte. Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860539-10000</p> <p>Date of Disbursement 12 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 129.00</p> <p>[MEMO ITEM] Memo Entry</p>
<p>B. Full Name (Last, First, Middle Initial) Staples Direct</p> <p>Mailing Address 500 Staples Drive</p> <p>City Framingham State MA Zip Code 01702</p> <p>Purpose of Disbursement Generic Cmte. Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860539-20000</p> <p>Date of Disbursement 12 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 93.79</p> <p>[MEMO ITEM] Memo Entry</p>
<p>C. Full Name (Last, First, Middle Initial) Buy Buy Baby</p> <p>Mailing Address 1683 Rockville Pike</p> <p>City Rockville State MD Zip Code 20852</p> <p>Purpose of Disbursement Generic Cmte. Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860539-30000</p> <p>Date of Disbursement 12 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 176.88</p> <p>[MEMO ITEM] Memo Entry</p>

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) TC (Gneil)</p> <p>Mailing Address P.O. Box 451179</p> <p>City Sunrise State FL Zip Code 33325</p> <p>Purpose of Disbursement Generic Cmte. Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860539-40000 Date of Disbursement 12 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 123.70</p> <p>[MEMO ITEM] Memo Entry</p>
<p>B. Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860540 Date of Disbursement 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>See Attached Memo Entry</p>
<p>C. Full Name (Last, First, Middle Initial) Washington Metro</p> <p>Mailing Address 1st and D Street SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860540-10000 Date of Disbursement 12 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] Memo Entry</p>

SUBTOTAL of Disbursements This Page (optional) ▶

100.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Committee Moving Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860542</p> <p>Date of Disbursement 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 1345.00</p> <p>Category/Type</p> <p>MEMO ATTACHED</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Generic Cmte. Postage/Delivery</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860543</p> <p>Date of Disbursement 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 336.00</p> <p>Category/Type 001</p> <p>See Attached Memo Entry</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) USPS</p> <p>Mailing Address Longworth House Office Buildin</p> <p>City Washington State DC Zip Code 20515</p> <p>Purpose of Disbursement Generic Cmte. Postage/Delivery</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860543-10000</p> <p>Date of Disbursement 12 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 336.00</p> <p>Category/Type 001</p> <p>[MEMO ITEM] Memo Entry</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1681.00

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Bank of America Mailing Address P.O. Box 53155 City Phoenix State AZ Zip Code 85072-3155 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860544 Date of Disbursement 01 / 16 / 2009 Amount of Each Disbursement this Period 51.28 See Attached Memo Entry
B.	Full Name (Last, First, Middle Initial) Chick-Fil-A Mailing Address 4238 Wilson Boulevard City Arlington State VA Zip Code 22203 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860544-10000 Date of Disbursement 12 / 08 / 2008 Amount of Each Disbursement this Period 51.28 [MEMO ITEM] Memo Entry
C.	Full Name (Last, First, Middle Initial) Bank of America Mailing Address P.O. Box 53155 City Phoenix State AZ Zip Code 85072-3155 Purpose of Disbursement Wire Services On Line Svcs. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860545 Date of Disbursement 01 / 16 / 2009 Amount of Each Disbursement this Period 37.95 See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)	89.23
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Verizon</p> <p>Mailing Address 1200 Walnut Hill Lane Suite 20</p> <p>City Irving State TX Zip Code 75038</p> <p>Purpose of Disbursement Wire Services On Line Svcs.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860545-10000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="37.95"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>B. Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860546</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="547.33"/></p> <p>See Attached Memo Entry</p>
<p>C. Full Name (Last, First, Middle Initial) Hertz Rent-A-Car</p> <p>Mailing Address 9000 Airport Boulevard</p> <p>City Los Angeles State CA Zip Code 90045</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860546-10000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="547.33"/></p> <p>[MEMO ITEM] Memo Entry</p>

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Bank of America Mailing Address P.O. Box 53155 City Phoenix State AZ Zip Code 85072-3155 Purpose of Disbursement Generic Cmte. Bank Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860547 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 6 / 2 0 0 9 Amount of Each Disbursement this Period 0.32 See Attached Memo Entry	001 Category/ Type
B.	Full Name (Last, First, Middle Initial) Bank Of America Mailing Address 100 North Tryon Street City Charlotte State NC Zip Code 28202 Purpose of Disbursement Generic Cmte. Bank Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860547-10000 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 8 Amount of Each Disbursement this Period 0.32 [MEMO ITEM] Memo Entry	001 Category/ Type
C.	Full Name (Last, First, Middle Initial) Bank of America Mailing Address P.O. Box 53155 City Phoenix State AZ Zip Code 85072-3155 Purpose of Disbursement Generic Cmte. Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860548 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 6 / 2 0 0 9 Amount of Each Disbursement this Period 472.68 See Attached Memo Entry	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

473.00

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) BJ's Wholesale</p> <p>Mailing Address 101 South Van Dorn Street</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement Generic Cmte. Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860548-10000</p> <p>Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 472.68</p> <p>[MEMO ITEM] Memo Entry</p>
<p>B. Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860549</p> <p>Date of Disbursement 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 150.75</p> <p>See Attached Memo Entry</p>
<p>C. Full Name (Last, First, Middle Initial) Exxonmobil</p> <p>Mailing Address 9336 Georgia Avenue</p> <p>City Silver Spring State MD Zip Code 20910</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860549-10000</p> <p>Date of Disbursement 12 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 22.72</p> <p>[MEMO ITEM] Memo Entry</p>

SUBTOTAL of Disbursements This Page (optional) ▶

150.75

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Chevron	Transaction ID: SB21B-860549-20000 Date of Disbursement 12 / 09 / 2008
	Mailing Address 10625 Connecticut Avenue	Amount of Each Disbursement this Period 22.31
	City Kensington State MD Zip Code 20895	[MEMO ITEM] Memo Entry
	Purpose of Disbursement Travel Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B.	Full Name (Last, First, Middle Initial) Exxonmobil	Transaction ID: SB21B-860549-30000 Date of Disbursement 12 / 15 / 2008
	Mailing Address 339 Pennsylvania Avenue SE	Amount of Each Disbursement this Period 24.64
	City Washington State DC Zip Code 20008	[MEMO ITEM] Memo Entry
	Purpose of Disbursement Travel Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C.	Full Name (Last, First, Middle Initial) Splash Car Wash	Transaction ID: SB21B-860549-40000 Date of Disbursement 12 / 15 / 2008
	Mailing Address 10 I Street SE	Amount of Each Disbursement this Period 19.00
	City Washington State DC Zip Code 20003	[MEMO ITEM] Memo Entry
	Purpose of Disbursement Travel Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Exxonmobil</p> <p>Mailing Address 9331 Georgia Avenue</p> <p>City Silver Spring State MD Zip Code 20910</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860549-50000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="26.81"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>B. Full Name (Last, First, Middle Initial) Exxonmobil</p> <p>Mailing Address 339 Pennsylvania Avenue SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860549-60000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="7.30"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>C. Full Name (Last, First, Middle Initial) Exxonmobil</p> <p>Mailing Address 339 Pennsylvania Avenue SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860549-70000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="27.97"/></p> <p>[MEMO ITEM] Memo Entry</p>

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B-860550 Date of Disbursement
	Mailing Address P.O. Box 53155	<input type="text" value="01"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City Phoenix State AZ Zip Code 85072-3155	Amount of Each Disbursement this Period
	Purpose of Disbursement Generic Cmte. Publications	<input type="text" value="7.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		See Attached Memo Entry

B.	Full Name (Last, First, Middle Initial) The Decatur Daily	Transaction ID: SB21B-860550-10000 Date of Disbursement
	Mailing Address 201 First Ave. SE.	<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>
	City Decatur State AL Zip Code 35609	Amount of Each Disbursement this Period
	Purpose of Disbursement Generic Cmte. Publications	<input type="text" value="7.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Memo Entry

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B-860551 Date of Disbursement
	Mailing Address P.O. Box 53155	<input type="text" value="01"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City Phoenix State AZ Zip Code 85072-3155	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel	<input type="text" value="1809.82"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1816.82"/>
TOTAL 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) Alamo Rent-A-Car <hr/> Mailing Address 4600 International Gateway <hr/> City Columbus State OH Zip Code 43219 Purpose of Disbursement Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860551-10000 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
	Amount of Each Disbursement this Period 55.00
	[MEMO ITEM] Memo Entry
	Category/Type 002
B. Full Name (Last, First, Middle Initial) Bistro Byronz <hr/> Mailing Address 6104 Line Avenue <hr/> City Shreveport State LA Zip Code 71106 Purpose of Disbursement Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860551-20000 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
	Amount of Each Disbursement this Period 17.72
	[MEMO ITEM] Memo Entry
	Category/Type 002
C. Full Name (Last, First, Middle Initial) Chevron <hr/> Mailing Address 3790 Industrial Drive <hr/> City Shreveport State LA Zip Code 71109 Purpose of Disbursement Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860551-30000 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
	Amount of Each Disbursement this Period 18.39
	[MEMO ITEM] Memo Entry
	Category/Type 002

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Chili's Grill</p> <p>Mailing Address 3025 East Texas Street</p> <p>City Bossier City State LA Zip Code 71111</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860551-40000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">26.00</td> </tr> </table> <p>[MEMO ITEM] Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	8	/	2	0	0	8	26.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	0	8	/	2	0	0	8													
26.00																						
<p>B. Full Name (Last, First, Middle Initial) Dollar Rac</p> <p>Mailing Address 4600 International Gateway</p> <p>City Columbus State OH Zip Code 43219</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860551-50000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">434.64</td> </tr> </table> <p>[MEMO ITEM] Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	8	/	2	0	0	8	434.64
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	0	8	/	2	0	0	8													
434.64																						
<p>C. Full Name (Last, First, Middle Initial) Friday's</p> <p>Mailing Address 3200 East Airfield Drive</p> <p>City Dallas State TX Zip Code 75261</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860551-60000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">19.00</td> </tr> </table> <p>[MEMO ITEM] Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	8	/	2	0	0	8	19.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	0	8	/	2	0	0	8													
19.00																						

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 188 / 345

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Hilton Restaurant</p> <p>Mailing Address 104 Market Street</p> <p>City Shreveport State LA Zip Code 71101</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860551-70000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">45.61</td> </tr> </table> <p>[MEMO ITEM] Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	8		2	0	0	8	45.61
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		0	8		2	0	0	8													
45.61																						
<p>B. Full Name (Last, First, Middle Initial) Hotwire</p> <p>Mailing Address 655 Montgomery Street</p> <p>City San Francisco State CA Zip Code 94111</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860551-80000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">253.92</td> </tr> </table> <p>[MEMO ITEM] Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	8		2	0	0	8	253.92
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		0	8		2	0	0	8													
253.92																						
<p>C. Full Name (Last, First, Middle Initial) Quiznos</p> <p>Mailing Address 88 East Broad Street # D</p> <p>City Columbus State OH Zip Code 43219</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860551-90000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">12.56</td> </tr> </table> <p>[MEMO ITEM] Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	8		2	0	0	8	12.56
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		0	8		2	0	0	8													
12.56																						

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) The Blind Tiger	Transaction ID: SB21B-860551-100000
	Mailing Address 120 Texas Street	Date of Disbursement 12 / 08 / 2008
	City Shreveport State LA Zip Code 71101	Amount of Each Disbursement this Period 11.05
	Purpose of Disbursement Travel Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) American Air	Transaction ID: SB21B-860551-110000
	Mailing Address 11711 East Pine Street	Date of Disbursement 12 / 09 / 2008
	City Tulsa State OK Zip Code 74116	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Travel Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Budget Rent A Car	Transaction ID: SB21B-860551-120000
	Mailing Address 5225 Monkhouse Drive	Date of Disbursement 12 / 09 / 2008
	City Shreveport State LA Zip Code 71109	Amount of Each Disbursement this Period 102.92
	Purpose of Disbursement Travel Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) High Beck Tavern</p> <p>Mailing Address 564 South High Street</p> <p>City Columbus State OH Zip Code 43215</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860551-130000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">41.40</td> </tr> </table> <p>[MEMO ITEM] Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	9	/	2	0	0	8	41.40
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	0	9	/	2	0	0	8													
41.40																						
<p>B. Full Name (Last, First, Middle Initial) Alamo Rent-A-Car</p> <p>Mailing Address 4600 International Gateway</p> <p>City Columbus State OH Zip Code 43219</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860551-140000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">55.00</td> </tr> </table> <p>[MEMO ITEM] Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	0	/	2	0	0	8	55.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	1	0	/	2	0	0	8													
55.00																						
<p>C. Full Name (Last, First, Middle Initial) Huntington Center Parking</p> <p>Mailing Address 41 South High Street</p> <p>City Columbus State OH Zip Code 43215</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860551-150000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">3.00</td> </tr> </table> <p>[MEMO ITEM] Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	0	/	2	0	0	8	3.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	1	0	/	2	0	0	8													
3.00																						

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Huntington Center Parking</p> <p>Mailing Address 41 South High Street</p> <p>City Columbus State OH Zip Code 43215</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860551-160000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="15.00"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>B. Full Name (Last, First, Middle Initial) Katzinger's</p> <p>Mailing Address 475 South 3rd Street</p> <p>City Columbus State OH Zip Code 43215</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860551-170000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="28.53"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>C. Full Name (Last, First, Middle Initial) Renaissance Hotel</p> <p>Mailing Address 50 North 3rd Street</p> <p>City Columbus State OH Zip Code 43215</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860551-180000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="109.14"/></p> <p>[MEMO ITEM] Memo Entry</p>

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Renaissance Hotel</p> <p>Mailing Address 50 North 3rd Street</p> <p>City Columbus State OH Zip Code 43215</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860551-190000</p> <p>Date of Disbursement 12 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 23.00</p> <p>[MEMO ITEM] Memo Entry</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Southwestair</p> <p>Mailing Address 2702 Love Field Drive</p> <p>City Dallas State TX Zip Code 75235</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860551-200000</p> <p>Date of Disbursement 12 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 161.50</p> <p>[MEMO ITEM] Memo Entry</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) BP</p> <p>Mailing Address 2900 Medina Road</p> <p>City Medina State OH Zip Code 44256</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860551-210000</p> <p>Date of Disbursement 12 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 17.87</p> <p>[MEMO ITEM] Memo Entry</p>

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Huntington Center Parking</p> <p>Mailing Address 41 South High Street</p> <p>City Columbus State OH Zip Code 43215</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860551-220000</p> <p>Date of Disbursement 12 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 15.00</p> <p>[MEMO ITEM] Memo Entry</p>
<p>B. Full Name (Last, First, Middle Initial) Old Angle Tavern</p> <p>Mailing Address 1848 West 25th Street</p> <p>City Cleveland State OH Zip Code 44113</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860551-230000</p> <p>Date of Disbursement 12 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 40.00</p> <p>[MEMO ITEM] Memo Entry</p>
<p>C. Full Name (Last, First, Middle Initial) Sheetz</p> <p>Mailing Address Route 30 & State Road 1013</p> <p>City Breezewood State PA Zip Code 15533</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860551-240000</p> <p>Date of Disbursement 12 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 22.72</p> <p>[MEMO ITEM] Memo Entry</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) Dollar Rac Mailing Address 4600 International Gateway City Columbus State OH Zip Code 43219 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860551-250000 Date of Disbursement 12 / 12 / 2008
	Amount of Each Disbursement this Period 223.15
	[MEMO ITEM] Memo Entry
	Category/Type 002
B. Full Name (Last, First, Middle Initial) Pmi BWI Longterm A Lot Mailing Address 649 Saint Paul Street City Baltimore State MD Zip Code 21240 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860551-260000 Date of Disbursement 12 / 12 / 2008
	Amount of Each Disbursement this Period 179.00
	[MEMO ITEM] Memo Entry
	Category/Type 002
C. Full Name (Last, First, Middle Initial) Shell Oil Mailing Address 7408 Baltimore Annapolis Blvd City Baltimore State MD Zip Code 21240 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860551-270000 Date of Disbursement 12 / 12 / 2008
	Amount of Each Disbursement this Period 10.25
	[MEMO ITEM] Memo Entry
	Category/Type 002

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Southwestair</p> <p>Mailing Address 2702 Love Field Drive</p> <p>City Dallas State TX Zip Code 75235</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860551-280000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;">-161.50</p> <p>[MEMO ITEM] Memo Entry</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Doubletree Hotels</p> <p>Mailing Address 50 South Front Street</p> <p>City Columbus State OH Zip Code 43215</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860551-290000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;">9.95</p> <p>[MEMO ITEM] Memo Entry</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860553</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;">29.00</p> <p>See Attached Memo Entry</p>

SUBTOTAL of Disbursements This Page (optional) ▶

29.00

TOTAL 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)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bank Of America</p> <p>Mailing Address 100 North Tryon Street</p> <p>City Charlotte State NC Zip Code 28202</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860553-10000</p> <p>Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 29.00</p> <p>[MEMO ITEM] Memo Entry</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860554</p> <p>Date of Disbursement 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 119.10</p> <p>See Attached Memo Entry</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Timberlake's Restaurant</p> <p>Mailing Address 1726 Connecticut Ave NW # 200</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860554-10000</p> <p>Date of Disbursement 12 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 30.25</p> <p>[MEMO ITEM] Memo Entry</p>

SUBTOTAL of Disbursements This Page (optional)	119.10
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Stoney's</p> <p>Mailing Address 1433 P St. NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Travel Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860554-20000 Date of Disbursement 12 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 88.85</p> <p>[MEMO ITEM] Memo Entry</p>
<p>B. Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860556 Date of Disbursement 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 33.85</p> <p>See Attached Memo Entry</p>
<p>C. Full Name (Last, First, Middle Initial) Bank Of America</p> <p>Mailing Address 100 North Tryon Street</p> <p>City Charlotte State NC Zip Code 28202</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860556-10000 Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 4.85</p> <p>[MEMO ITEM] Memo Entry</p>

SUBTOTAL of Disbursements This Page (optional) ▶

33.85

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bank Of America</p> <p>Mailing Address 100 North Tryon Street</p> <p>City Charlotte State NC Zip Code 28202</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860556-20000</p> <p>Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 29.00</p> <p>[MEMO ITEM] Memo Entry</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860557</p> <p>Date of Disbursement 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 206.79</p> <p>See Attached Memo Entry</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Renaissance Hotel</p> <p>Mailing Address 80 West Red Oak Lane</p> <p>City White Plains State NY Zip Code 10604</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860557-10000</p> <p>Date of Disbursement 12 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 10.68</p> <p>[MEMO ITEM] Memo Entry</p>

SUBTOTAL of Disbursements This Page (optional)	206.79
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 199 / 345

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Renaissance Hotel</p> <p>Mailing Address 80 West Red Oak Lane</p> <p>City White Plains State NY Zip Code 10604</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860557-20000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">10.68</td> </tr> </table> <p>[MEMO ITEM] Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	8	/	2	0	0	8	10.68
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	0	8	/	2	0	0	8													
10.68																						
<p>B.</p> <p>Full Name (Last, First, Middle Initial) WPPA-White Plains Center</p> <p>Mailing Address 11 Ferris Avenue</p> <p>City White Plains State NY Zip Code 10601</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860557-30000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">1.50</td> </tr> </table> <p>[MEMO ITEM] Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	8	/	2	0	0	8	1.50
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	0	8	/	2	0	0	8													
1.50																						
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Applebee's</p> <p>Mailing Address 42 Westchester Avenue</p> <p>City Port Chester State NY Zip Code 10573</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860557-40000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">23.83</td> </tr> </table> <p>[MEMO ITEM] Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	8	/	2	0	0	8	23.83
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	0	8	/	2	0	0	8													
23.83																						

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 200 / 345

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Burger King</p> <p>Mailing Address NJ Turnpike Mile Post 92.9 Sou</p> <p>City Woodbridge State NJ Zip Code 07095</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860557-50000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">8.98</td> </tr> </table> <p>[MEMO ITEM] Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	8	/	2	0	0	8	8.98
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	0	8	/	2	0	0	8													
8.98																						
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Citgo</p> <p>Mailing Address 2420 New York Avenue</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860557-60000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">8.58</td> </tr> </table> <p>[MEMO ITEM] Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	8	/	2	0	0	8	8.58
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	0	8	/	2	0	0	8													
8.58																						
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Priceline.Com</p> <p>Mailing Address 800 Connecticut Avenue</p> <p>City Norwalk State CT Zip Code 06854</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860557-70000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">119.54</td> </tr> </table> <p>[MEMO ITEM] Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	8	/	2	0	0	8	119.54
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	0	8	/	2	0	0	8													
119.54																						

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Sunoco</p> <p>Mailing Address NJ Turnpike Mile Post 30.2 Sou</p> <p>City Cherry Hill State NJ Zip Code 08002</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860557-80000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="23.00"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860558</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="29.00"/></p> <p>See Attached Memo Entry</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Bank Of America</p> <p>Mailing Address 100 North Tryon Street</p> <p>City Charlotte State NC Zip Code 28202</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860558-10000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="29.00"/></p> <p>[MEMO ITEM] Memo Entry</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="29.00"/>
TOTAL 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 202 / 345

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Bank of America Mailing Address P.O. Box 53155 City Phoenix State AZ Zip Code 85072-3155 Purpose of Disbursement Generic Cmte. Publications Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860559 Date of Disbursement 01 / 16 / 2009 Amount of Each Disbursement this Period 19.95 See Attached Memo Entry
B.	Full Name (Last, First, Middle Initial) Newslibrary.Com Mailing Address 397 Main Street City Chester State VT Zip Code 05143 Purpose of Disbursement Generic Cmte. Publications Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860559-10000 Date of Disbursement 12 / 09 / 2008 Amount of Each Disbursement this Period 19.95 [MEMO ITEM] Memo Entry
C.	Full Name (Last, First, Middle Initial) Bank of America Mailing Address P.O. Box 53155 City Phoenix State AZ Zip Code 85072-3155 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860560 Date of Disbursement 01 / 16 / 2009 Amount of Each Disbursement this Period 564.65 See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional) ▶

584.60

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) BP Mart</p> <p>Mailing Address 5626 Highway 20</p> <p>City Cartersville State GA Zip Code 30120</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860560-10000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="17.60"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>B. Full Name (Last, First, Middle Initial) Shell Oil</p> <p>Mailing Address 2181 Old Fort Parkway</p> <p>City Murfreesboro State TN Zip Code 37129</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860560-20000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="22.78"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>C. Full Name (Last, First, Middle Initial) Hertz Rent-A-Car</p> <p>Mailing Address 1920 Auto Port Drive</p> <p>City Atlanta State GA Zip Code 30303</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860560-30000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="224.40"/></p> <p>[MEMO ITEM] Memo Entry</p>

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Omni Hotel</p> <p>Mailing Address 100 CNN Center</p> <p>City Atlanta State GA Zip Code 30303</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860560-40000</p> <p>Date of Disbursement 12 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 39.95</p> <p>[MEMO ITEM] Memo Entry</p>
<p>B. Full Name (Last, First, Middle Initial) Shell Oil</p> <p>Mailing Address 1338 Virginia Avenue</p> <p>City East Point State GA Zip Code 30344</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860560-50000</p> <p>Date of Disbursement 12 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 4.08</p> <p>[MEMO ITEM] Memo Entry</p>
<p>C. Full Name (Last, First, Middle Initial) Supershuttle</p> <p>Mailing Address Aviation Blvd & Elm Road</p> <p>City Baltimore State MD Zip Code 21240</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860560-60000</p> <p>Date of Disbursement 12 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 42.00</p> <p>[MEMO ITEM] Memo Entry</p>

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Marriott</p> <p>Mailing Address 265 Peachtree Center</p> <p>City Atlanta State GA Zip Code 30303</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860560-70000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="196.84"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>B. Full Name (Last, First, Middle Initial) Suntrust Plaza</p> <p>Mailing Address 303 Peachtree Center Avenue</p> <p>City Atlanta State GA Zip Code 30308</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860560-80000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="17.00"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>C. Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860562</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="30.70"/></p> <p>See Attached Memo Entry</p>

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bank Of America</p> <p>Mailing Address 100 North Tryon Street</p> <p>City Charlotte State NC Zip Code 28202</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860562-10000</p> <p>Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 1.70</p> <p>[MEMO ITEM] Memo Entry</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bank Of America</p> <p>Mailing Address 100 North Tryon Street</p> <p>City Charlotte State NC Zip Code 28202</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860562-20000</p> <p>Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 29.00</p> <p>[MEMO ITEM] Memo Entry</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860563</p> <p>Date of Disbursement 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 29.00</p> <p>See Attached Memo Entry</p>

SUBTOTAL of Disbursements This Page (optional)	29.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bank Of America</p> <p>Mailing Address 100 North Tryon Street</p> <p>City Charlotte State NC Zip Code 28202</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860563-10000</p> <p>Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 29.00</p> <p>[MEMO ITEM] Memo Entry</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860564</p> <p>Date of Disbursement 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 1235.22</p> <p>See Attached Memo Entry</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Einstein Bros</p> <p>Mailing Address 41 South High</p> <p>City Columbus State OH Zip Code 43206</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860564-10000</p> <p>Date of Disbursement 12 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 19.55</p> <p>[MEMO ITEM] Memo Entry</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1235.22

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Hotwire</p> <p>Mailing Address 3150 139th Avenue SE</p> <p>City Bellevue State WA Zip Code 94111</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860564-20000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="85.91"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>B. Full Name (Last, First, Middle Initial) Hyatt Hotel</p> <p>Mailing Address 75 East State Street</p> <p>City Columbus State OH Zip Code 43215</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860564-30000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="21.00"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>C. Full Name (Last, First, Middle Initial) Hyatt Hotel</p> <p>Mailing Address 75 East State Street</p> <p>City Columbus State OH Zip Code 43215</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860564-40000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="136.00"/></p> <p>[MEMO ITEM] Memo Entry</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Northstar Cafe</p> <p>Mailing Address 951 North High</p> <p>City Columbus State OH Zip Code 43201</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860564-50000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="14.00"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>B. Full Name (Last, First, Middle Initial) Renaissance Hotel</p> <p>Mailing Address 50 North 3rd Street</p> <p>City Columbus State OH Zip Code 43215</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860564-60000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="85.00"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>C. Full Name (Last, First, Middle Initial) Renaissance Hotel</p> <p>Mailing Address 50 North 3rd Street</p> <p>City Columbus State OH Zip Code 43215</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860564-70000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="41.00"/></p> <p>[MEMO ITEM] Memo Entry</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL 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 210 / 345

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Renaissance Hotel</p> <p>Mailing Address 50 North 3rd Street</p> <p>City Columbus State OH Zip Code 43215</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860564-80000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="18.00"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Rusty Bucket-Bexley</p> <p>Mailing Address 2158 East Main Street</p> <p>City Columbus State OH Zip Code 43209</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860564-90000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="20.00"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Skyline Chili</p> <p>Mailing Address 3720 South High Street</p> <p>City Fairfield State OH Zip Code 45014</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860564-100000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="20.00"/></p> <p>[MEMO ITEM] Memo Entry</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Southwestair</p> <p>Mailing Address 2702 Love Field Drive</p> <p>City Dallas State TX Zip Code 75235</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860564-110000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="161.50"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>B. Full Name (Last, First, Middle Initial) Einstein Bros</p> <p>Mailing Address 41 South High</p> <p>City Columbus State OH Zip Code 43206</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860564-120000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="11.06"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>C. Full Name (Last, First, Middle Initial) High Beck Tavern</p> <p>Mailing Address 564 South High</p> <p>City Columbus State OH Zip Code 43215</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860564-130000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="39.00"/></p> <p>[MEMO ITEM] Memo Entry</p>

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)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Speedway</p> <p>Mailing Address 6175 East Livingston</p> <p>City Columbus State OH Zip Code 43219</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860564-140000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="11.86"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>B. Full Name (Last, First, Middle Initial) Dollar Rac</p> <p>Mailing Address 4600 International Gateway</p> <p>City Columbus State OH Zip Code 43219</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860564-150000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="400.16"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>C. Full Name (Last, First, Middle Initial) Pmi BWI Esp Lot</p> <p>Mailing Address One Aviation Blvd</p> <p>City Baltimore State MD Zip Code 21240</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860564-160000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="117.00"/></p> <p>[MEMO ITEM] Memo Entry</p>

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Starbucks</p> <p>Mailing Address 4600 International Gateway</p> <p>City Columbus State OH Zip Code 43219</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860564-170000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="14.18"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>B. Full Name (Last, First, Middle Initial) Westin Hotel</p> <p>Mailing Address 310 South High</p> <p>City Columbus State OH Zip Code 43215</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860564-180000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="20.00"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>C. Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Wire Services On Line Svcs.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860565</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="58.58"/></p> <p>See Attached Memo Entry</p>

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)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Godaddy.Com</p> <hr/> <p>Mailing Address 14455 North Hayden Road Suite</p> <hr/> <p>City State Zip Code Scottsdale AZ 85260</p> <hr/> <p>Purpose of Disbursement Wire Services On Line Svcs.</p> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860565-10000</p> <p>Date of Disbursement 12 / 08 / 2008</p> <hr/> <p>Amount of Each Disbursement this Period 29.81</p> <p>[MEMO ITEM] Memo Entry</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Godaddy.Com</p> <hr/> <p>Mailing Address 14455 North Hayden Road Suite</p> <hr/> <p>City State Zip Code Scottsdale AZ 85260</p> <hr/> <p>Purpose of Disbursement Wire Services On Line Svcs.</p> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860565-20000</p> <p>Date of Disbursement 12 / 10 / 2008</p> <hr/> <p>Amount of Each Disbursement this Period 10.63</p> <p>[MEMO ITEM] Memo Entry</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) One World Hosting</p> <hr/> <p>Mailing Address P.O. Box 880</p> <hr/> <p>City State Zip Code Worthington OH 43085</p> <hr/> <p>Purpose of Disbursement Wire Services On Line Svcs.</p> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860565-30000</p> <p>Date of Disbursement 12 / 11 / 2008</p> <hr/> <p>Amount of Each Disbursement this Period 9.95</p> <p>[MEMO ITEM] Memo Entry</p>

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Godaddy.Com</p> <p>Mailing Address 14455 North Hayden Road Suite</p> <p>City Scottsdale State AZ Zip Code 85260</p> <p>Purpose of Disbursement Wire Services On Line Svcs. Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860565-40000 Date of Disbursement 12 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 8.19</p> <p>[MEMO ITEM] Memo Entry</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860566 Date of Disbursement 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 0.02</p> <p>See Attached Memo Entry</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Bank Of America</p> <p>Mailing Address 100 North Tryon Street</p> <p>City Charlotte State NC Zip Code 28202</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860566-10000 Date of Disbursement 12 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 0.02</p> <p>[MEMO ITEM] Memo Entry</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.02

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Bank of America Mailing Address P.O. Box 53155 City Phoenix State AZ Zip Code 85072-3155 Purpose of Disbursement Generic Cmte. Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860567 Date of Disbursement 01 / 16 / 2009 Amount of Each Disbursement this Period 869.77 See Attached Memo Entry
B.	Full Name (Last, First, Middle Initial) Flowers And Fancies Mailing Address 11404 Cronridge Drive City Owings Mills State MD Zip Code 21117 Purpose of Disbursement Generic Cmte. Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860567-10000 Date of Disbursement 12 / 19 / 2008 Amount of Each Disbursement this Period 104.05 [MEMO ITEM] Memo Entry
C.	Full Name (Last, First, Middle Initial) Minimus Mailing Address 914 Tourmaline Drive City Newbury Park State CA Zip Code 91320 Purpose of Disbursement Generic Cmte. Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860567-20000 Date of Disbursement 12 / 19 / 2008 Amount of Each Disbursement this Period 622.85 [MEMO ITEM] Memo Entry

SUBTOTAL of Disbursements This Page (optional) ▶

869.77

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Papermart</p> <p>Mailing Address 5361 Alexander Street</p> <p>City Los Angeles State CA Zip Code 90040</p> <p>Purpose of Disbursement Generic Cmte. Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860567-30000</p> <p>Date of Disbursement 12 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 142.87</p> <p>[MEMO ITEM] Memo Entry</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860568</p> <p>Date of Disbursement 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 903.00</p> <p>See Attached Memo Entry</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Usairways</p> <p>Mailing Address 4000 East Sky Harbor Boulevard</p> <p>City Phoenix State AZ Zip Code 85281</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860568-10000</p> <p>Date of Disbursement 12 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 173.00</p> <p>[MEMO ITEM] Memo Entry</p>

SUBTOTAL of Disbursements This Page (optional) ▶

903.00

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Usairways</p> <p>Mailing Address 4000 East Sky Harbor Boulevard</p> <p>City Phoenix State AZ Zip Code 85281</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B-860568-20000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="173.00"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Usairways</p> <p>Mailing Address 4000 East Sky Harbor Boulevard</p> <p>City Phoenix State AZ Zip Code 85281</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B-860568-30000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="173.00"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) American Air</p> <p>Mailing Address 4333 Amon Carter Boulevard</p> <p>City Fort Worth State TX Zip Code 74063</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B-860568-40000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="219.50"/></p> <p>[MEMO ITEM] Memo Entry</p>

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Usairways</p> <p>Mailing Address 4000 East Sky Harbor Boulevard</p> <p>City Phoenix State AZ Zip Code 85281</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860568-50000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="164.50"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860570</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="172.85"/></p> <p>See Attached Memo Entry</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Marcparc Inc</p> <p>Mailing Address One Thomas Circle NW</p> <p>City Washington State DC Zip Code 20006</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860570-10000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="8.00"/></p> <p>[MEMO ITEM] Memo Entry</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="172.85"/>
TOTAL 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Central Michel Richard</p> <p>Mailing Address 1001 Pennsylvania Avenue NW #</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860570-20000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="71.40"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) National Democratic Club</p> <p>Mailing Address 30 Ivy Street SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860570-30000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="49.25"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) 701/801 Pennsylvania Ave</p> <p>Mailing Address 801 Pennsylvania Avenue NW</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860570-40000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="20.00"/></p> <p>[MEMO ITEM] Memo Entry</p>

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Posto Restaurant</p> <p>Mailing Address 1515 14th Street NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860570-50000</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="24.20"/></p> <p>[MEMO ITEM] Memo Entry</p>
<p>B. Full Name (Last, First, Middle Initial) Automatic Data Processing</p> <p>Mailing Address 11411 Red Run Blvd.</p> <p>City Owings Mills State MD Zip Code 21117</p> <p>Purpose of Disbursement Computer Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860517</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="35.74"/></p>
<p>C. Full Name (Last, First, Middle Initial) Auburn Quad, Inc.</p> <p>Mailing Address P.O. Box 390728</p> <p>City Cambridge State MA Zip Code 02139</p> <p>Purpose of Disbursement Generic Cmte. Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860919</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="0.69"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="36.43"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Lori Ruk</p> <p>Mailing Address 2939 Van Ness Street, NW Apt. 1234</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860571</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;">-373.69</p>
<p>B. Full Name (Last, First, Middle Initial) Lori Ruk</p> <p>Mailing Address 2939 Van Ness Street, NW Apt. 1234</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860572</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;">373.69</p>
<p>C. Full Name (Last, First, Middle Initial) Beth Barefoot</p> <p>Mailing Address 815 Maryland Ave NE Apt. 205</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860779</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;">3588.02</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3588.02

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) Emily Elizabeth Charlap <hr/> Mailing Address 719 D Street, NE Apt. 105 <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860780 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 9
	Amount of Each Disbursement this Period 2547.69
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) George Connelly <hr/> Mailing Address 113 1/2 Tennessee Ave, NE <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860781 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 9
	Amount of Each Disbursement this Period 1963.49
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Jacqueline M Forte-Mackay <hr/> Mailing Address 7511 Jaffrey Road <hr/> City Fort Washington State MD Zip Code 20744 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860782 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 9
	Amount of Each Disbursement this Period 7168.37
	Category/Type 001
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SUBTOTAL of Disbursements This Page (optional) ▶

11679.55

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

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) Amanda Kohn <hr/> Mailing Address 7746 Wolford Way <hr/> City Lorton State VA Zip Code 22079 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860783 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 9
	Amount of Each Disbursement this Period 3463.12
	<input type="text" value="001"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Kristie Mark <hr/> Mailing Address 2226 Decatur Place, NW <hr/> City Washington State DC Zip Code 20008 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860784 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 9
	Amount of Each Disbursement this Period 6788.91
	<input type="text" value="001"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Glynis L Mason <hr/> Mailing Address 1807 D Dewitt Avenue <hr/> City Alexandria State VA Zip Code 22301 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860785 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 9
	Amount of Each Disbursement this Period 4059.39
	<input type="text" value="001"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

14311.42

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Wilma J Simms <hr/> Mailing Address 11644 Lockwood Dr. Apt. 204 <hr/> City Silver Spring State MD Zip Code 20904 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860786 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 9	Amount of Each Disbursement this Period 2151.43
B.	Full Name (Last, First, Middle Initial) Milly C Velez-Cooper <hr/> Mailing Address 1682 Cedar Hollow Way <hr/> City Reston State VA Zip Code 20194 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860787 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 9	Amount of Each Disbursement this Period 3430.56
C.	Full Name (Last, First, Middle Initial) William Ermini <hr/> Mailing Address 2006 Oswald Place <hr/> City Falls Church State VA Zip Code 20043 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860788 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 9	Amount of Each Disbursement this Period 2854.03

SUBTOTAL of Disbursements This Page (optional) ▶

8436.02

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) David Winston	Transaction ID: SB21B-860790 Date of Disbursement
	Mailing Address 4141 N. Henderson Rd. Apt. 1213	<input type="text" value="01"/> / <input type="text" value="21"/> / <input type="text" value="2009"/>
	City Arlington State VA Zip Code 22203	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Candidate Name	<input type="text" value="5266.34"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type <input type="text" value="001"/>
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Brandon English	Transaction ID: SB21B-860791 Date of Disbursement
	Mailing Address 1201 S. Courthouse Road #829	<input type="text" value="01"/> / <input type="text" value="21"/> / <input type="text" value="2009"/>
	City Arlington State VA Zip Code 22204	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Candidate Name	<input type="text" value="2780.52"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type <input type="text" value="001"/>
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Jason Rosenbaum	Transaction ID: SB21B-860793 Date of Disbursement
	Mailing Address 912 F St., NW #503	<input type="text" value="01"/> / <input type="text" value="21"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20004	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Candidate Name	<input type="text" value="3900.71"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type <input type="text" value="001"/>
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="11947.57"/>
TOTAL 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) Taryn Rosenkranz <hr/> Mailing Address 2234 Observatory Place NW <hr/> City Washington State DC Zip Code 20007 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860794 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 9
	Amount of Each Disbursement this Period 4887.80
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Johanna Berkson <hr/> Mailing Address 7710 Woodmont Ave #805 <hr/> City Bethesda State MD Zip Code 20814 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860795 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 9
	Amount of Each Disbursement this Period 3734.64
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Lila Rose <hr/> Mailing Address 1531 North Pierce Street #811 <hr/> City Arlington State VA Zip Code 22209 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860796 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 9
	Amount of Each Disbursement this Period 3204.62
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

11827.06

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Brian L Wolff</p> <p>Mailing Address 1443 Q Street, NW</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860797</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="10565.54"/></p>
<p>B. Full Name (Last, First, Middle Initial) Beverly Gilyard</p> <p>Mailing Address 2530 Hunters Square Court</p> <p>City Reston State VA Zip Code 20191</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860798</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="7695.22"/></p>
<p>C. Full Name (Last, First, Middle Initial) Adam Goldberg</p> <p>Mailing Address 2151 California Street, NW Apt. 203</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860799</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="2592.55"/></p>

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Katherine Kochman</p> <p>Mailing Address 3208 1/2 17th Street, NW</p> <p>City Washington State DC Zip Code 20010</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Transaction ID: SB21B-860801</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="990.94"/></p>
<p>B. Full Name (Last, First, Middle Initial) Jennifer Pihlaja</p> <p>Mailing Address 3300 16th St NW #1015</p> <p>City Washington State DC Zip Code 20010</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Transaction ID: SB21B-860802</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="7608.79"/></p>
<p>C. Full Name (Last, First, Middle Initial) Bret Wask</p> <p>Mailing Address 224 Gretna Green Court</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Transaction ID: SB21B-860803</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5513.31"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="14113.04"/>
TOTAL 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) Brennan Bilberry <hr/> Mailing Address 722 5th St NE <hr/> City Washington State DC Zip Code 20002 Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860804 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 9
	Amount of Each Disbursement this Period 2919.27
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Adam Broder <hr/> Mailing Address 3118 Mt. Pleasant St. NW <hr/> City Washington State DC Zip Code 20010 Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860805 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 9
	Amount of Each Disbursement this Period 2713.17
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Nicole Landset <hr/> Mailing Address 1826 15th Street, NW <hr/> City Washington State DC Zip Code 20009 Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860806 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 9
	Amount of Each Disbursement this Period 5381.88
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

11014.32

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Heather McHugh</p> <p>Mailing Address 2130 P Street NW Apt.603</p> <p>City Washington State DC Zip Code 20037</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860808 Date of Disbursement 01 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 4926.09</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Kevin McKeon</p> <p>Mailing Address 408 15th St., SE Unit B</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860809 Date of Disbursement 01 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 3651.39</p> <p>001 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Kelly Polce</p> <p>Mailing Address 1725 New Hampshire Ave., NW Apt #303</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860810 Date of Disbursement 01 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 2192.91</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

10770.39

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Bradley Pollock</p> <p>Mailing Address 612 N Oxford St</p> <p>City Arlington State VA Zip Code 22203</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860811</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2603.43"/></p>
<p>B. Full Name (Last, First, Middle Initial) Stephen Carter</p> <p>Mailing Address 1207 Constitution Ave., NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860812</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2022.01"/></p>
<p>C. Full Name (Last, First, Middle Initial) Jennifer Crider</p> <p>Mailing Address 3634 Gunston Road</p> <p>City Alexandria State VA Zip Code 22303</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860813</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="7171.89"/></p>

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Christopher Fitzgerald</p> <p>Mailing Address 2630 Adams Mill Road, NW Apt. 308</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860814 Date of Disbursement 01 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 1330.90</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Ryan Rudominer</p> <p>Mailing Address 1320 N. Veitech Street Apt. 1201</p> <p>City Arlington State VA Zip Code 22201</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860815 Date of Disbursement 01 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 4692.16</p> <p>001 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Sabrina Siddiqui</p> <p>Mailing Address 1308 Clifton NW #405</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860816 Date of Disbursement 01 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 1540.28</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

7563.34

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Steven Silver</p> <p>Mailing Address 4409 4TH Road North #2</p> <p>City Arlington State VA Zip Code 22203</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860817</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4011.30"/></p>
<p>B. Full Name (Last, First, Middle Initial) Douglass Thornell</p> <p>Mailing Address 1831 Wyoming Ave. NE #1</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860818</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1013.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Nicole Dorris</p> <p>Mailing Address 350 9th Street Apt. 31</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860819</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2481.33"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

7505.63

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

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Debra Guilford</p> <p>Mailing Address 1200 N St NW Apt 412</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860820</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center; border: 1px solid black; padding: 5px;">3581.37</p>
<p>B. Full Name (Last, First, Middle Initial) Brigette Workman</p> <p>Mailing Address 1200 N. Veitch St. #623</p> <p>City Arlington State VA Zip Code 22201</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860821</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center; border: 1px solid black; padding: 5px;">2110.68</p>
<p>C. Full Name (Last, First, Middle Initial) Amy K. Eckert</p> <p>Mailing Address 259 S. Pickett Street #301</p> <p>City Arlington State VA Zip Code 22304</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860823</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center; border: 1px solid black; padding: 5px;">5388.88</p>

SUBTOTAL of Disbursements This Page (optional) ▶

11080.93

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Diana Fassbender</p> <p>Mailing Address 1629 Columbia Rd NW Apt 630</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860824 Date of Disbursement 01 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 3181.94</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Rachel Fischetti</p> <p>Mailing Address 2827 28th St., NW #30</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860825 Date of Disbursement 01 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 2676.53</p> <p>001 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Meghan Johnson</p> <p>Mailing Address 1200 23rd Street NW #706</p> <p>City Washington State DC Zip Code 20037</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860826 Date of Disbursement 01 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 6185.34</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

12043.81

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Melissa Kurek</p> <p>Mailing Address 1741 U St NW Apt 1</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860827 Date of Disbursement 01 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 4356.89</p> <p>001 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Nicole M Runge</p> <p>Mailing Address 631 G Street, SE Apt. 1</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860828 Date of Disbursement 01 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 7758.88</p> <p>001 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Nicole M Runge</p> <p>Mailing Address 631 G Street, SE Apt. 1</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860829 Date of Disbursement 01 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 14712.50</p> <p>001 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

26828.27

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

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

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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)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Amy Salomone</p> <p>Mailing Address 2568 University Place, N.W. Apt. 2</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860830 Date of Disbursement 01 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 2499.13</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Amanda Swenson</p> <p>Mailing Address 4419 N. 4th Road Apt. 2</p> <p>City Arlington State VA Zip Code 22203</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860831 Date of Disbursement 01 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 3680.74</p> <p>001 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Alexander Van Wagner</p> <p>Mailing Address 1339 Perry Place NW</p> <p>City Washington State DC Zip Code 20010</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860832 Date of Disbursement 01 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 1968.79</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

8148.66

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

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

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Lauren Dikis <hr/> Mailing Address 3105 11th St., NW <hr/> City Washington State DC Zip Code 20010 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860834 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 9	Amount of Each Disbursement this Period 3306.62
B.	Full Name (Last, First, Middle Initial) Robert Fenity <hr/> Mailing Address 2732 Ordway Street NW #6 <hr/> City Washington State DC Zip Code 20008 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860835 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 9	Amount of Each Disbursement this Period 2538.63
C.	Full Name (Last, First, Middle Initial) Brent Parrish <hr/> Mailing Address 719 D. St. NE Apt. 301 <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860836 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 1 / 2 0 0 9	Amount of Each Disbursement this Period 2969.99

SUBTOTAL of Disbursements This Page (optional)	8815.24
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

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Stella Ross</p> <p>Mailing Address 622 F Street NW # 1</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860837</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="3291.91"/></p>
<p>B. Full Name (Last, First, Middle Initial) Todd Schulte</p> <p>Mailing Address 631 D Street, NW Apt. 230</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860838</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="3688.99"/></p>
<p>C. Full Name (Last, First, Middle Initial) Gregory Berlin</p> <p>Mailing Address 2701 Calvert St., NW Apt. 404</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860839</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="1876.05"/></p>

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Angela Guzman</p> <p>Mailing Address 1309 N. Glebe Road</p> <p>City Arlington State VA Zip Code 22207</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860840</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3809.43"/></p>
<p>B. Full Name (Last, First, Middle Initial) David Higa</p> <p>Mailing Address 801 North Monroe St. #407</p> <p>City Arlington State VA Zip Code 22201</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860841</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2806.97"/></p>
<p>C. Full Name (Last, First, Middle Initial) Nirali Amin</p> <p>Mailing Address 614 Walden Way</p> <p>City Lumberton State NJ Zip Code 08048</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860778</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2357.54"/></p>

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Brent Kimmel</p> <p>Mailing Address 304 2nd St., SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860789</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3721.02"/></p>
<p>B. Full Name (Last, First, Middle Initial) Matthew Kehres</p> <p>Mailing Address 2800 Quebec St., NW Apt. 1213</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860792</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2816.21"/></p>
<p>C. Full Name (Last, First, Middle Initial) Ari Schoenholtz</p> <p>Mailing Address 7125 Fairfax Road</p> <p>City Bethesda State MD Zip Code 20814</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860800</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2081.26"/></p>

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TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s)
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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
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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Christine Lombardi</p> <p>Mailing Address 1436 E Street SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860807</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2217.09"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>B. Full Name (Last, First, Middle Initial) Jessica Aune</p> <p>Mailing Address 138A North Carolina Ave, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860822</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1889.67"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>C. Full Name (Last, First, Middle Initial) Louisa Whitney</p> <p>Mailing Address 1701 16th St., NW Apt. 721</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860833</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="6242.10"/></p> <p>Category/Type: <input type="text" value="001"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) Automatic Data Processing Mailing Address 11411 Red Run Blvd. City Owings Mills State MD Zip Code 21117 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860971 Date of Disbursement <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/>
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B. Full Name (Last, First, Middle Initial) Automatic Data Processing Mailing Address 11411 Red Run Blvd. City Owings Mills State MD Zip Code 21117 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860843 Date of Disbursement <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/>
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C. Full Name (Last, First, Middle Initial) Automatic Data Processing Mailing Address 11411 Red Run Blvd. City Owings Mills State MD Zip Code 21117 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860845 Date of Disbursement <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/>
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139975.66

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Automatic Data Processing Mailing Address 11411 Red Run Blvd. City Owings Mills State MD Zip Code 21117 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860846 Date of Disbursement 01 / 21 / 2009 Amount of Each Disbursement this Period 9887.41 Category/Type 001
B.	Full Name (Last, First, Middle Initial) Integral Resources, Inc. Mailing Address 1972 Massachusetts Avenue City Cambridge State MA Zip Code 02140 Purpose of Disbursement Generic Cmte. Telemarketing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860576 Date of Disbursement 01 / 22 / 2009 Amount of Each Disbursement this Period 1995.49 Category/Type
C.	Full Name (Last, First, Middle Initial) Integral Resources, Inc. Mailing Address 1972 Massachusetts Avenue City Cambridge State MA Zip Code 02140 Purpose of Disbursement Generic Cmte. Telemarketing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860577 Date of Disbursement 01 / 22 / 2009 Amount of Each Disbursement this Period 7979.36 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

19862.26

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

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

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Integral Resources, Inc.</p> <p>Mailing Address 1972 Massachusetts Avenue</p> <p>City Cambridge State MA Zip Code 02140</p> <p>Purpose of Disbursement Generic Cmte. Telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860578</p> <p>Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 12044.96</p>
<p>B. Full Name (Last, First, Middle Initial) Integral Resources, Inc.</p> <p>Mailing Address 1972 Massachusetts Avenue</p> <p>City Cambridge State MA Zip Code 02140</p> <p>Purpose of Disbursement Generic Cmte. Telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860579</p> <p>Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 12893.40</p>
<p>C. Full Name (Last, First, Middle Initial) Integral Resources, Inc.</p> <p>Mailing Address 1972 Massachusetts Avenue</p> <p>City Cambridge State MA Zip Code 02140</p> <p>Purpose of Disbursement Generic Cmte. Telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860580</p> <p>Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 3008.39</p>

SUBTOTAL of Disbursements This Page (optional) ▶

27946.75

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Integral Resources, Inc.</p> <p>Mailing Address 1972 Massachusetts Avenue</p> <p>City Cambridge State MA Zip Code 02140</p> <p>Purpose of Disbursement Generic Cmte. Telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860581</p> <p>Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 21508.16</p>
<p>B. Full Name (Last, First, Middle Initial) Integral Resources, Inc.</p> <p>Mailing Address 1972 Massachusetts Avenue</p> <p>City Cambridge State MA Zip Code 02140</p> <p>Purpose of Disbursement Generic Cmte. Telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860582</p> <p>Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 4603.86</p>
<p>C. Full Name (Last, First, Middle Initial) Integral Resources, Inc.</p> <p>Mailing Address 1972 Massachusetts Avenue</p> <p>City Cambridge State MA Zip Code 02140</p> <p>Purpose of Disbursement Generic Cmte. Telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860583</p> <p>Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 11143.76</p>

SUBTOTAL of Disbursements This Page (optional) ▶

37255.78

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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 Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Integral Resources, Inc.</p> <p>Mailing Address 1972 Massachusetts Avenue</p> <p>City Cambridge State MA Zip Code 02140</p> <p>Purpose of Disbursement Generic Cmte. Telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860584</p> <p>Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 3540.21</p>
<p>B. Full Name (Last, First, Middle Initial) Integral Resources, Inc.</p> <p>Mailing Address 1972 Massachusetts Avenue</p> <p>City Cambridge State MA Zip Code 02140</p> <p>Purpose of Disbursement Generic Cmte. Telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860585</p> <p>Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 7109.35</p>
<p>C. Full Name (Last, First, Middle Initial) Integral Resources, Inc.</p> <p>Mailing Address 1972 Massachusetts Avenue</p> <p>City Cambridge State MA Zip Code 02140</p> <p>Purpose of Disbursement Generic Cmte. Telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860586</p> <p>Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 9657.43</p>

SUBTOTAL of Disbursements This Page (optional)	20306.99
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Integral Resources, Inc.</p> <p>Mailing Address 1972 Massachusetts Avenue</p> <p>City Cambridge State MA Zip Code 02140</p> <p>Purpose of Disbursement Generic Cmte. Telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860587</p> <p>Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 1629.33</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Integral Resources, Inc.</p> <p>Mailing Address 1972 Massachusetts Avenue</p> <p>City Cambridge State MA Zip Code 02140</p> <p>Purpose of Disbursement Computer Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860588</p> <p>Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 5688.75</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Integral Resources, Inc.</p> <p>Mailing Address 1972 Massachusetts Avenue</p> <p>City Cambridge State MA Zip Code 02140</p> <p>Purpose of Disbursement Generic Cmte. Telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860589</p> <p>Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 55502.08</p>

SUBTOTAL of Disbursements This Page (optional) ▶

62820.16

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Integral Resources, Inc.</p> <p>Mailing Address 1972 Massachusetts Avenue</p> <p>City Cambridge State MA Zip Code 02140</p> <p>Purpose of Disbursement Generic Cmte. Telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860590</p> <p>Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 14358.03</p>
<p>B. Full Name (Last, First, Middle Initial) Integral Resources, Inc.</p> <p>Mailing Address 1972 Massachusetts Avenue</p> <p>City Cambridge State MA Zip Code 02140</p> <p>Purpose of Disbursement Generic Cmte. Telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860591</p> <p>Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 17106.88</p>
<p>C. Full Name (Last, First, Middle Initial) Integral Resources, Inc.</p> <p>Mailing Address 1972 Massachusetts Avenue</p> <p>City Cambridge State MA Zip Code 02140</p> <p>Purpose of Disbursement Generic Cmte. Telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860592</p> <p>Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 19767.68</p>

SUBTOTAL of Disbursements This Page (optional) ▶

51232.59

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

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Integral Resources, Inc.</p> <p>Mailing Address 1972 Massachusetts Avenue</p> <p>City Cambridge State MA Zip Code 02140</p> <p>Purpose of Disbursement Generic Cmte. Telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860593</p> <p>Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 25724.63</p>
<p>B. Full Name (Last, First, Middle Initial) Integral Resources, Inc.</p> <p>Mailing Address 1972 Massachusetts Avenue</p> <p>City Cambridge State MA Zip Code 02140</p> <p>Purpose of Disbursement Generic Cmte. Telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860594</p> <p>Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 3100.91</p>
<p>C. Full Name (Last, First, Middle Initial) Integral Resources, Inc.</p> <p>Mailing Address 1972 Massachusetts Avenue</p> <p>City Cambridge State MA Zip Code 02140</p> <p>Purpose of Disbursement Generic Cmte. Telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860595</p> <p>Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 14350.45</p>

SUBTOTAL of Disbursements This Page (optional) ▶

43175.99

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Brian Walsworth</p> <p>Mailing Address 1122 East Capitol NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Generic Cmte. Research Materials</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860597</p> <p>Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period -879.65</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Brian Walsworth</p> <p>Mailing Address 1122 East Capitol NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860598</p> <p>Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period -176.64</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Brian Walsworth</p> <p>Mailing Address 1122 East Capitol NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Generic Cmte. Research Materials</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860599</p> <p>Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 879.65</p>

SUBTOTAL of Disbursements This Page (optional) ▶

-176.64

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Brian Walsworth <hr/> Mailing Address 1122 East Capitol NE <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860600 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 176.64
B.	Full Name (Last, First, Middle Initial) Washington Metropolitan Area Transit Authority <hr/> Mailing Address 600 Fifth Street, NW <hr/> City Washington State DC Zip Code 20001 <hr/> Purpose of Disbursement Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860770 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 1534.55
C.	Full Name (Last, First, Middle Initial) Action Mailers, Inc. <hr/> Mailing Address 90 Commerce Drive <hr/> City Aston State PA Zip Code 19014 <hr/> Purpose of Disbursement Generic Cmte. Printing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860601 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 9206.76

SUBTOTAL of Disbursements This Page (optional)	10917.95
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Merkle Response Services, Inc.</p> <p>Mailing Address 100 Jamison Court</p> <p>City Hagerstown State MD Zip Code 21740</p> <p>Purpose of Disbursement Generic Cmte. Postage/Delivery</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860615</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="564.90"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>B. Full Name (Last, First, Middle Initial) Merkle Response Services, Inc.</p> <p>Mailing Address 100 Jamison Court</p> <p>City Hagerstown State MD Zip Code 21740</p> <p>Purpose of Disbursement Computer Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860616</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="32098.64"/></p> <p>Category/Type: <input type="text"/></p>
<p>C. Full Name (Last, First, Middle Initial) Meyer Associates</p> <p>Mailing Address 14 North Seventh Avenue</p> <p>City St. Cloud State MN Zip Code 56303</p> <p>Purpose of Disbursement Generic Cmte. Telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860617</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="9553.50"/></p> <p>Category/Type: <input type="text"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="42217.04"/>
TOTAL 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Print Mail Communications</p> <p>Mailing Address 7201 Lockport Place</p> <p>City Lorton State VA Zip Code 22079</p> <p>Purpose of Disbursement Generic Cmte. Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860618 Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 79.08</p>
<p>B. Full Name (Last, First, Middle Initial) Print Mail Communications</p> <p>Mailing Address 7201 Lockport Place</p> <p>City Lorton State VA Zip Code 22079</p> <p>Purpose of Disbursement Generic Cmte. Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860619 Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 1200.00</p>
<p>C. Full Name (Last, First, Middle Initial) Print Mail Communications</p> <p>Mailing Address 7201 Lockport Place</p> <p>City Lorton State VA Zip Code 22079</p> <p>Purpose of Disbursement Generic Cmte. Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860620 Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 597.60</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1876.68

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

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Share Group, Inc.</p> <p>Mailing Address PO Box 55183</p> <p>City Boston State MA Zip Code 02205-5183</p> <p>Purpose of Disbursement Generic Cmte. Telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B-860621</p> <p>Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 15511.50</p>
<p>B. Full Name (Last, First, Middle Initial) Stockton, Inc.</p> <p>Mailing Address 7940 Cessna Avenue</p> <p>City Gaithersburg State MD Zip Code 20879</p> <p>Purpose of Disbursement Generic Cmte. Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B-860622</p> <p>Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 73.55</p>
<p>C. Full Name (Last, First, Middle Initial) Stockton, Inc.</p> <p>Mailing Address 7940 Cessna Avenue</p> <p>City Gaithersburg State MD Zip Code 20879</p> <p>Purpose of Disbursement Generic Cmte. Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B-860623</p> <p>Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 422.45</p>

SUBTOTAL of Disbursements This Page (optional) ▶

16007.50

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Triplex A Donnelley Company <hr/> Mailing Address PO Box 3603 <hr/> City Omaha State NE Zip Code 68103 <hr/> Purpose of Disbursement Computer Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860624 Date of Disbursement 01 / 23 / 2009 <hr/> Amount of Each Disbursement this Period 1136.66
B.	Full Name (Last, First, Middle Initial) Triplex A Donnelley Company <hr/> Mailing Address PO Box 3603 <hr/> City Omaha State NE Zip Code 68103 <hr/> Purpose of Disbursement List Rental Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860625 Date of Disbursement 01 / 23 / 2009 <hr/> Amount of Each Disbursement this Period 344.00
C.	Full Name (Last, First, Middle Initial) American List Counsel, Inc. <hr/> Mailing Address P.O. Box 32189 <hr/> City Hartford State CT Zip Code 06150-2189 <hr/> Purpose of Disbursement Generic Cmte. List Exchange Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860602 Date of Disbursement 01 / 23 / 2009 <hr/> Amount of Each Disbursement this Period 3159.15

SUBTOTAL of Disbursements This Page (optional) ▶

4639.81

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) American List Counsel, Inc. <hr/> Mailing Address P.O. Box 32189 <hr/> City Hartford State CT Zip Code 06150-2189 <hr/> Purpose of Disbursement Generic Cmte. List Exchange Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860603 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 9
	Amount of Each Disbursement this Period 575.16
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) AP/Wide World Photos <hr/> Mailing Address PO Box 414262 <hr/> City Boston State MA Zip Code 02241-4262 <hr/> Purpose of Disbursement Generic Cmte. Printing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860604 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 9
	Amount of Each Disbursement this Period 1100.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Avalanche Services <hr/> Mailing Address 515-B Industrial Blvd <hr/> City Kearneysville State WV Zip Code 25430 <hr/> Purpose of Disbursement Generic Cmte. Printing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860605 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 9
	Amount of Each Disbursement this Period 21105.75
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

22780.91

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Blue State Digital, LLC Mailing Address 734 15th Street, NW Suite 1200 City Washington State DC Zip Code 20005 Purpose of Disbursement Generic Cmte. OnLine Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860606 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 9	Amount of Each Disbursement this Period 20550.00
B.	Full Name (Last, First, Middle Initial) Care2.com, Inc. Mailing Address 275 Shoreline Dr #150 City Redwood City State CA Zip Code 94065 Purpose of Disbursement List Rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860607 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 9	Amount of Each Disbursement this Period 3161.65
C.	Full Name (Last, First, Middle Initial) The Data Center, Inc. Mailing Address 11200 Waples Mill Road Suite 100 City Fairfax State VA Zip Code 22030 Purpose of Disbursement Computer Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860608 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 9	Amount of Each Disbursement this Period 14000.00

SUBTOTAL of Disbursements This Page (optional)		37711.65
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) The Data Center, Inc.</p> <p>Mailing Address 11200 Waples Mill Road Suite 100</p> <p>City State Zip Code Fairfax VA 22030</p> <p>Purpose of Disbursement Computer Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860609</p> <p>Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 1440.00</p>
<p>B. Full Name (Last, First, Middle Initial) Deliveries Plus, Inc.</p> <p>Mailing Address PO Box 45013</p> <p>City State Zip Code Somerville MA 02145</p> <p>Purpose of Disbursement Generic Cmte. Delivery Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860610</p> <p>Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 56.36</p>
<p>C. Full Name (Last, First, Middle Initial) Deliveries Plus, Inc.</p> <p>Mailing Address PO Box 45013</p> <p>City State Zip Code Somerville MA 02145</p> <p>Purpose of Disbursement Generic Cmte. Delivery Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860611</p> <p>Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 56.36</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1552.72

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Deliveries Plus, Inc.</p> <p>Mailing Address PO Box 45013</p> <p>City Somerville State MA Zip Code 02145</p> <p>Purpose of Disbursement Generic Cmte. Delivery Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860612</p> <p>Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 56.36</p>
<p>B. Full Name (Last, First, Middle Initial) DirectAdvantage Marketing</p> <p>Mailing Address The Outreach Center PO Box 55043</p> <p>City Boston State MA Zip Code 02205</p> <p>Purpose of Disbursement Generic Cmte. Telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860613</p> <p>Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 3044.75</p>
<p>C. Full Name (Last, First, Middle Initial) DirectAdvantage Marketing</p> <p>Mailing Address The Outreach Center PO Box 55043</p> <p>City Boston State MA Zip Code 02205</p> <p>Purpose of Disbursement Generic Cmte. Telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860614</p> <p>Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 4731.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

7832.11

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

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Halloran Development Company, Inc.	Transaction ID: SB21B-860639 Date of Disbursement
	Mailing Address 2508 Dewitt Avenue	<input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City Alexandria State VA Zip Code 22301	Amount of Each Disbursement this Period
	Purpose of Disbursement Generic Strategic Political Services	<input type="text" value="10000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) InFact Communications	Transaction ID: SB21B-860640 Date of Disbursement
	Mailing Address 1150 K Street, NW Suite 1109	<input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement Generic Strategic Political Services	<input type="text" value="15000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) InFact Communications	Transaction ID: SB21B-860641 Date of Disbursement
	Mailing Address 1150 K Street, NW Suite 1109	<input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel	<input type="text" value="12590.44"/>
	Candidate Name	Category/Type <input type="text" value="002"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="37590.44"/>
TOTAL 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Glynis L Mason	Transaction ID: SB21B-860642 Date of Disbursement 01 / 23 / 2009
	Mailing Address 1807 D Dewitt Avenue	Amount of Each Disbursement this Period 83.75
	City Alexandria State VA Zip Code 22301	
	Purpose of Disbursement Generic Cmte. Events/Meetings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MSHC Partners Inc.	Transaction ID: SB21B-860643 Date of Disbursement 01 / 23 / 2009
	Mailing Address 1155 15th St NW Suite 300	Amount of Each Disbursement this Period 6250.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Generic Cmte. Media Services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) NCEC Services, Inc.	Transaction ID: SB21B-860644 Date of Disbursement 01 / 23 / 2009
	Mailing Address 122 C Street, NW Suite 650	Amount of Each Disbursement this Period 15000.00
	City Washington State DC Zip Code 20001	
	Purpose of Disbursement Generic Strategic Political Services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	21333.75
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Occasions Caterers, Inc.</p> <p>Mailing Address 5458 3rd Street, NE</p> <p>City Washington State DC Zip Code 20011</p> <p>Purpose of Disbursement Generic Cmte. Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860645 Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 6522.31</p> <p>Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Pitney Bowes Global Financial Services LLC</p> <p>Mailing Address PO Box 856460</p> <p>City Louisville State KY Zip Code 40285</p> <p>Purpose of Disbursement Equipment Rental/Maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-863150 Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 4227.77</p> <p>Category/Type 001</p>
<p>C. Full Name (Last, First, Middle Initial) Thrifty Car Rental</p> <p>Mailing Address DTG Operations, Inc. - BOK Lockbox 2241</p> <p>City Tulsa State OK Zip Code 74182</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860647 Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 2898.09</p> <p>Category/Type 002</p>

SUBTOTAL of Disbursements This Page (optional) ▶

13648.17

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Thrifty Car Rental	Transaction ID: SB21B-860648 Date of Disbursement
	Mailing Address DTG Operations, Inc. - BOK Lockbox 2241	<input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City Tulsa State OK Zip Code 74182	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel	<input type="text" value="11663.41"/>
	Candidate Name	<input type="text" value="002"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: SB21B-860649 Date of Disbursement
	Mailing Address PO Box 7247-0244	<input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City Philadelphia State PA Zip Code 19170-0001	Amount of Each Disbursement this Period
	Purpose of Disbursement Generic Cmte. Delivery Expense	<input type="text" value="85.46"/>
	Candidate Name	<input type="text"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) United Parcel Service	Transaction ID: SB21B-860650 Date of Disbursement
	Mailing Address PO Box 7247-0244	<input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City Philadelphia State PA Zip Code 19170-0001	Amount of Each Disbursement this Period
	Purpose of Disbursement Generic Cmte. Processing Fees	<input type="text" value="9.00"/>
	Candidate Name	<input type="text"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="11757.87"/>
TOTAL 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 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

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 Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Aramark Refreshment Services</p> <p>Mailing Address 8240 Stayton Drive Suite N</p> <p>City Jessup State MD Zip Code 20794</p> <p>Purpose of Disbursement Generic Cmte. Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860627</p> <p>Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 237.20</p>
<p>B. Full Name (Last, First, Middle Initial) Aramark Refreshment Services</p> <p>Mailing Address 8240 Stayton Drive Suite N</p> <p>City Jessup State MD Zip Code 20794</p> <p>Purpose of Disbursement Generic Cmte. Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860628</p> <p>Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 366.72</p>
<p>C. Full Name (Last, First, Middle Initial) Brian L Wolff</p> <p>Mailing Address 1443 Q Street, NW</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860651</p> <p>Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 20.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

623.92

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) AVF Consulting, Inc.</p> <p>Mailing Address 1220-C Joppa Road Suite 514</p> <p>City Baltimore State MD Zip Code 21286</p> <p>Purpose of Disbursement Computer Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860629</p> <p>Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 87.50</p> <p>Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Carey International, Inc.</p> <p>Mailing Address Billing Department P.O. Box 631414</p> <p>City Baltimore State MD Zip Code 21263-1414</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860630</p> <p>Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 2885.47</p> <p>Category/Type 002</p>
<p>C. Full Name (Last, First, Middle Initial) C & E Systems, LLC</p> <p>Mailing Address 2236 SE 10th Ave</p> <p>City Portland State OR Zip Code 97214</p> <p>Purpose of Disbursement Equipment Rental/Maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860631</p> <p>Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 700.00</p> <p>Category/Type 001</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3672.97

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Andrei Cherny</p> <p>Mailing Address 2713 N. 21st Ave.</p> <p>City Phoenix State AZ Zip Code 85009</p> <p>Purpose of Disbursement Generic Strategic Political Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860632</p> <p>Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 10000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Construction Catering, Inc.</p> <p>Mailing Address 2472 NW 21st Ter</p> <p>City Miami State FL Zip Code 33142</p> <p>Purpose of Disbursement Generic Cmte. Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860633</p> <p>Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Democratic Properties Corporation</p> <p>Mailing Address Leasehold Account 430 South Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Leasehold Improvements</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860634</p> <p>Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 4218.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

15218.00

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 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

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 Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Democratic Properties Corporation</p> <p>Mailing Address Leasehold Account 430 South Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Leasehold Improvements</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860635</p> <p>Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 4218.00</p>
<p>B. Full Name (Last, First, Middle Initial) Eleison Group, LLC</p> <p>Mailing Address 1655 N Fort Myer Dr Suite 700</p> <p>City Arlington State VA Zip Code 22209</p> <p>Purpose of Disbursement Generic Strategic Political Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860636</p> <p>Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 15000.00</p>
<p>C. Full Name (Last, First, Middle Initial) M & R Strategic Resources Attn: Accounting Department</p> <p>Mailing Address 2120 L Street, NW Sixth Floor</p> <p>City Washington State DC Zip Code 20037</p> <p>Purpose of Disbursement Generic Cmte. Administrative Svcs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860652</p> <p>Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 7500.00</p>

SUBTOTAL of Disbursements This Page (optional)	26718.00
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Brilliant Corners Research, Inc.	Transaction ID: SB21B-860655 Date of Disbursement
	Mailing Address 1336 North Capitol Street, NW 2nd Floor	<input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement Generic Strategic Political Services	<input type="text" value="10000.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Brilliant Corners Research, Inc.	Transaction ID: SB21B-860656 Date of Disbursement
	Mailing Address 1336 North Capitol Street, NW 2nd Floor	<input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement Generic Cmte. Polling	<input type="text" value="12000.00"/>
	Candidate Name	005 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Automatic Data Processing	Transaction ID: SB21B-860758 Date of Disbursement
	Mailing Address 11411 Red Run Blvd.	<input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City Owings Mills State MD Zip Code 21117	Amount of Each Disbursement this Period
	Purpose of Disbursement Computer Services	<input type="text" value="47.16"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="22047.16"/>
TOTAL 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Share Group, Inc.	Transaction ID: SB21B-860720 Date of Disbursement 01 / 26 / 2009
	Mailing Address PO Box 55183	Amount of Each Disbursement this Period 22608.00
	City Boston State MA Zip Code 02205-5183	
	Purpose of Disbursement Generic Cmte. Telemarketing	Category/ Type
	Candidate Name	
	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.	Full Name (Last, First, Middle Initial) State of Kansas Attn: Office of State	Transaction ID: SB21B-860693 Date of Disbursement 01 / 26 / 2009
	Mailing Address Treasurer 900 SW Jackson St., Ste 201	Amount of Each Disbursement this Period -165.25
	City Topeka State KS Zip Code 66612	
	Purpose of Disbursement Generic Cmte. Research Materials	Category/ Type
	Candidate Name	
	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:	
C.	Full Name (Last, First, Middle Initial) Accountemps	Transaction ID: SB21B-860694 Date of Disbursement 01 / 26 / 2009
	Mailing Address 12400 Collections Center Drive	Amount of Each Disbursement this Period 374.40
	City Chicago State IL Zip Code 60693	
	Purpose of Disbursement Generic Cmte. Temporary Services	Category/ Type
	Candidate Name	
	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:	

SUBTOTAL of Disbursements This Page (optional) ▶

22817.15

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Drew Altizer</p> <p>Mailing Address 1949 Green Street #2</p> <p>City San Francisco State CA Zip Code 94123</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860695</p> <p>Date of Disbursement 01 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 600.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Drew Altizer</p> <p>Mailing Address 1949 Green Street #2</p> <p>City San Francisco State CA Zip Code 94123</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860696</p> <p>Date of Disbursement 01 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 600.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Drew Altizer</p> <p>Mailing Address 1949 Green Street #2</p> <p>City San Francisco State CA Zip Code 94123</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860697</p> <p>Date of Disbursement 01 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 25.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1225.00

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Drew Altizer	Transaction ID: SB21B-860698 Date of Disbursement 01 / 26 / 2009
	Mailing Address 1949 Green Street #2	Amount of Each Disbursement this Period 600.00
	City San Francisco State CA Zip Code 94123	
	Purpose of Disbursement Generic Cmte. Events/Meetings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) AT & T Mobility	Transaction ID: SB21B-860699 Date of Disbursement 01 / 26 / 2009
	Mailing Address PO Box 6463	Amount of Each Disbursement this Period 1975.10
	City Carol Stream State IL Zip Code 60197-6463	
	Purpose of Disbursement Telephones	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Catalist, LLC	Transaction ID: SB21B-860700 Date of Disbursement 01 / 26 / 2009
	Mailing Address 1101 Vermont Ave., NW	Amount of Each Disbursement this Period 2563.02
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Generic Cmte. Publications	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	5138.12
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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) David L. Andrukitis, Inc. <hr/> Mailing Address 50 E Street, SE <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement Generic Cmte. Printing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860701 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 9
	Amount of Each Disbursement this Period 10204.88
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Government News Network GovNet <hr/> Mailing Address P.O. Box 2041 <hr/> City Trenton State NJ Zip Code 08607 <hr/> Purpose of Disbursement Generic Cmte. Publications Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860702 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 9
	Amount of Each Disbursement this Period 125.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Iron Mountain Records Management <hr/> Mailing Address P.O. Box 27128 <hr/> City New York State NY Zip Code 10087-7128 <hr/> Purpose of Disbursement Generic Cmte. Rent/Occupancy Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860703 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 9
	Amount of Each Disbursement this Period 351.18
	Category/ Type 001
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	10681.06
TOTAL This Period (last page this line number only) ▶	(Empty)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) Iron Mountain Records Management <hr/> Mailing Address P.O. Box 27128 <hr/> City New York State NY Zip Code 10087-7128 <hr/> Purpose of Disbursement Generic Cmte. Rent/Occupancy Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860704 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 9
	Amount of Each Disbursement this Period 559.54
	Category/ Type 001
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) JustinBradley <hr/> Mailing Address 1725 I Street, NW Suite 300 <hr/> City Washington State DC Zip Code 20006 <hr/> Purpose of Disbursement Generic Cmte. Temporary Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860705 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 9
	Amount of Each Disbursement this Period 2883.51
	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Katrina Photography <hr/> Mailing Address 25 Lone Oak Drive <hr/> City Centerport State NY Zip Code 11721 <hr/> Purpose of Disbursement Generic Cmte. Events/Meetings Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860706 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 9
	Amount of Each Disbursement this Period 300.00
	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3743.05

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Lexis-Nexis</p> <p>Mailing Address PO Box 7247-7090</p> <p>City Philadelphia State PA Zip Code 19170-7090</p> <p>Purpose of Disbursement Wire Services On Line Svcs.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860707</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4111.60"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Verizon Business</p> <p>Mailing Address 500 Technology Drive</p> <p>City Weldon Springs State MO Zip Code 63304</p> <p>Purpose of Disbursement Telephones</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860708</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4667.06"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Nannette Bedway Studio</p> <p>Mailing Address 812 Huron Road Suite 424</p> <p>City Cleveland State OH Zip Code 44115</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860709</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="300.00"/></p> <p>Category/Type: <input type="text"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="9078.66"/>
TOTAL 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Pitney Bowes, Inc.</p> <p>Mailing Address P.O. Box 856390</p> <p>City Louisville State KY Zip Code 40285-6390</p> <p>Purpose of Disbursement Generic Cmte. Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860710</p> <p>Date of Disbursement 01 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 203.95</p>
<p>B. Full Name (Last, First, Middle Initial) Pitney Bowes, Inc.</p> <p>Mailing Address P.O. Box 856390</p> <p>City Louisville State KY Zip Code 40285-6390</p> <p>Purpose of Disbursement Generic Cmte. Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860711</p> <p>Date of Disbursement 01 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 12.24</p>
<p>C. Full Name (Last, First, Middle Initial) Emily Sokolski</p> <p>Mailing Address 4123 Arkansas Ave., NW</p> <p>City Washington State DC Zip Code 20011</p> <p>Purpose of Disbursement Stipend</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860712</p> <p>Date of Disbursement 01 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 96.00</p>

SUBTOTAL of Disbursements This Page (optional)	312.19
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 25505 City Lehigh Valley State PA Zip Code 18002-5505 Purpose of Disbursement Wireless Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860716 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 9 Amount of Each Disbursement this Period 3362.05 001 Category/ Type
B.	Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 660720 City Dallas State TX Zip Code 75266 Purpose of Disbursement Telephones Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860717 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 9 Amount of Each Disbursement this Period 31.72 001 Category/ Type
C.	Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 660720 City Dallas State TX Zip Code 75266 Purpose of Disbursement Telephones Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860718 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 9 Amount of Each Disbursement this Period 32.16 001 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	3425.93
TOTAL 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 660720 City Dallas State TX Zip Code 75266 Purpose of Disbursement Telephones Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860719 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 9	Amount of Each Disbursement this Period 32.16
B.	Full Name (Last, First, Middle Initial) US Express Leasing Inc. Mailing Address Dept #1608 City Denver State CO Zip Code 80291 Purpose of Disbursement Generic Cmte. Processing Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860722 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 9	Amount of Each Disbursement this Period 10.00
C.	Full Name (Last, First, Middle Initial) US Express Leasing Inc. Mailing Address Dept #1608 City Denver State CO Zip Code 80291 Purpose of Disbursement Property Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860723 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 9	Amount of Each Disbursement this Period 5341.50

SUBTOTAL of Disbursements This Page (optional) ▶

5383.66

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) US Express Leasing Inc.</p> <p>Mailing Address Dept #1608</p> <p>City Denver State CO Zip Code 80291</p> <p>Purpose of Disbursement Equipment Rental/Maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860724</p> <p>Date of Disbursement 01 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 4462.72</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) US Express Leasing Inc.</p> <p>Mailing Address Dept #1608</p> <p>City Denver State CO Zip Code 80291</p> <p>Purpose of Disbursement Generic Cmte. Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860725</p> <p>Date of Disbursement 01 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 434.36</p> <p>Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Key Equipment Finance</p> <p>Mailing Address Payment Processing P.O. Box 74713</p> <p>City Cleveland State OH Zip Code 44194</p> <p>Purpose of Disbursement Equipment Rental/Maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-861715</p> <p>Date of Disbursement 01 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 797.36</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5694.44

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) UBS Financial Services, Inc. Mailing Address 1501 K Street, NW Suite 1100 City Washington State DC Zip Code 20006 Purpose of Disbursement Retirement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860734 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 0 9	Amount of Each Disbursement this Period 11809.59
B.	Full Name (Last, First, Middle Initial) United States Postal Service Mailing Address 900 Brentwood Road, NE City Washington State DC Zip Code 20066 Purpose of Disbursement Generic Cmte. Postage/Delivery Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860740 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 8 / 2 0 0 9	Amount of Each Disbursement this Period 20000.00
C.	Full Name (Last, First, Middle Initial) Nicole M Runge Mailing Address 631 G Street, SE Apt. 1 City Washington State DC Zip Code 20003 Purpose of Disbursement Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860741 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 8 / 2 0 0 9	Amount of Each Disbursement this Period 50.18

SUBTOTAL of Disbursements This Page (optional) ▶	31859.77
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Verizon Online</p> <p>Mailing Address PO Box 12045</p> <p>City Trenton State NJ Zip Code 08650-2045</p> <p>Purpose of Disbursement Computer Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860742</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="49.99"/></p>
<p>B. Full Name (Last, First, Middle Initial) Mobile Commons</p> <p>Mailing Address 86 Chambers St Suite 701</p> <p>City New York State NY Zip Code 10007</p> <p>Purpose of Disbursement Generic Cmte. Advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860748</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2591.19"/></p>
<p>C. Full Name (Last, First, Middle Initial) Google, Inc.</p> <p>Mailing Address Dept. 33654 PO Box 39000</p> <p>City San Francisco State CA Zip Code 94139</p> <p>Purpose of Disbursement Generic Cmte. Advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860749</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2635.60"/></p>

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Stockton, Inc. Mailing Address 7940 Cessna Avenue City Gaithersburg State MD Zip Code 20879 Purpose of Disbursement Generic Cmte. Postage/Delivery Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860754 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 0 9	Amount of Each Disbursement this Period 86.94
B.	Full Name (Last, First, Middle Initial) Global Strategy Group, LLC Mailing Address 895 Broadway, 5th Floor City New York State NY Zip Code 10003 Purpose of Disbursement Generic Cmte. Polling Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860744 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 0 9	Amount of Each Disbursement this Period 11000.00
C.	Full Name (Last, First, Middle Initial) Global Strategy Group, LLC Mailing Address 895 Broadway, 5th Floor City New York State NY Zip Code 10003 Purpose of Disbursement Generic Cmte. Polling Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-860745 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 0 9	Amount of Each Disbursement this Period 9000.00

SUBTOTAL of Disbursements This Page (optional) ▶

20086.94

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Global Strategy Group, LLC</p> <p>Mailing Address 895 Broadway, 5th Floor</p> <p>City New York State NY Zip Code 10003</p> <p>Purpose of Disbursement Generic Cmte. Polling</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860746</p> <p>Date of Disbursement 01 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 11500.00</p> <p>005 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Global Strategy Group, LLC</p> <p>Mailing Address 895 Broadway, 5th Floor</p> <p>City New York State NY Zip Code 10003</p> <p>Purpose of Disbursement Generic Cmte. Polling</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860747</p> <p>Date of Disbursement 01 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 11500.00</p> <p>005 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Data Direct, Inc.</p> <p>Mailing Address 181 Potomac Street PO Box 855</p> <p>City Harpers State WV Zip Code 25425</p> <p>Purpose of Disbursement Computer Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860759</p> <p>Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 3288.00</p> <p>Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

26288.00

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

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) The Data Center, Inc.	Transaction ID: SB21B-860760 Date of Disbursement
	Mailing Address 11200 Waples Mill Road Suite 100	<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Fairfax State VA Zip Code 22030	Amount of Each Disbursement this Period
	Purpose of Disbursement Computer Services	<input type="text" value="14000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) The Data Center, Inc.	Transaction ID: SB21B-860761 Date of Disbursement
	Mailing Address 11200 Waples Mill Road Suite 100	<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Fairfax State VA Zip Code 22030	Amount of Each Disbursement this Period
	Purpose of Disbursement Computer Services	<input type="text" value="1050.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Print Mail Communications	Transaction ID: SB21B-860762 Date of Disbursement
	Mailing Address 7201 Lockport Place	<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Lorton State VA Zip Code 22079	Amount of Each Disbursement this Period
	Purpose of Disbursement Generic Cmte. Postage/Delivery	<input type="text" value="442.75"/>
	Candidate Name	Category/Type <input type="text" value="001"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="15492.75"/>
TOTAL 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) The Limousine Connection, Inc.</p> <p>Mailing Address PO Box 411</p> <p>City Fairfax State VA Zip Code 22038</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860763</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3128.00"/></p> <p>Category/Type: <input type="text" value="002"/></p>
<p>B. Full Name (Last, First, Middle Initial) Emily Sokolski</p> <p>Mailing Address 4123 Arkansas Ave., NW</p> <p>City Washington State DC Zip Code 20011</p> <p>Purpose of Disbursement Stipend</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860764</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="264.00"/></p> <p>Category/Type: <input type="text"/></p>
<p>C. Full Name (Last, First, Middle Initial) Deluxe Business Forms and Solutions</p> <p>Mailing Address P.O. Box 742572</p> <p>City Cincinnati State OH Zip Code 45274</p> <p>Purpose of Disbursement Generic Cmte. Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860765</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="91.37"/></p> <p>Category/Type: <input type="text"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3483.37"/>
TOTAL 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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Field Strategies Inc.</p> <p>Mailing Address 2120 L Street, NW Suite 305</p> <p>City Washington State DC Zip Code 20037</p> <p>Purpose of Disbursement Travel Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860766 Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 3064.28</p> <p>002 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Gilbert & Wolfand, PC</p> <p>Mailing Address 2201 Wisconsin Avenue, NW</p> <p>City Washington State DC Zip Code 20007</p> <p>Purpose of Disbursement Accounting Svcs. Rendered Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860767 Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 3767.50</p> <p>001 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) RST Marketing Associates, Inc.</p> <p>Mailing Address Attn: Lara Burford 1272 Corporate Park Dr</p> <p>City Forest State VA Zip Code 24551</p> <p>Purpose of Disbursement Generic Cmte. Printing Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860768 Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 4432.20</p> <p>Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

11263.98

TOTAL 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)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) The Strategy Group</p> <p>Mailing Address 1603 Orrington Avenue Suite 1730</p> <p>City Evanston State IL Zip Code 60201</p> <p>Purpose of Disbursement Generic Cmte. Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860769 Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 3000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Assembly Public Information Office</p> <p>Mailing Address 202 Legislative Office Bldg</p> <p>City Albany State NY Zip Code 12248</p> <p>Purpose of Disbursement Generic Cmte. Research Materials</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860777 Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 669.00</p>
<p>C. Full Name (Last, First, Middle Initial) Anzalone Liszt Research, Inc.</p> <p>Mailing Address 260 Commerce Street 4th Floor</p> <p>City Montgomery State AL Zip Code 36104</p> <p>Purpose of Disbursement Generic Cmte. Polling</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860847 Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 11500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

15169.00

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

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Anzalone Liszt Research, Inc.</p> <p>Mailing Address 260 Commerce Street 4th Floor</p> <p>City Montgomery State AL Zip Code 36104</p> <p>Purpose of Disbursement Generic Cmte. Polling</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860848</p> <p>Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 13000.00</p> <p>005 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Anzalone Liszt Research, Inc.</p> <p>Mailing Address 260 Commerce Street 4th Floor</p> <p>City Montgomery State AL Zip Code 36104</p> <p>Purpose of Disbursement Generic Cmte. Polling</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860849</p> <p>Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 11500.00</p> <p>005 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Anzalone Liszt Research, Inc.</p> <p>Mailing Address 260 Commerce Street 4th Floor</p> <p>City Montgomery State AL Zip Code 36104</p> <p>Purpose of Disbursement Generic Cmte. Polling</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860850</p> <p>Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 11000.00</p> <p>005 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

35500.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Anzalone Liszt Research, Inc.</p> <p>Mailing Address 260 Commerce Street 4th Floor</p> <p>City Montgomery State AL Zip Code 36104</p> <p>Purpose of Disbursement Generic Cmte. Polling</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860851 Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 12000.00</p> <p>005 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Bank of America, NA</p> <p>Mailing Address 730 15th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Interest</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860756 Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 33474.33</p> <p>Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Offset for In-House Contributions</p> <p>Candidate Name Democratic Congressional Campaign Committee</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-861095 Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period -382.27</p> <p>Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

45092.06

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

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Sabrina Siddiqui</p> <p>Mailing Address 1308 Clifton NW #405</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860925</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="824.83"/></p>
<p>B. Full Name (Last, First, Middle Initial) Automatic Data Processing</p> <p>Mailing Address 11411 Red Run Blvd.</p> <p>City Owings Mills State MD Zip Code 21117</p> <p>Purpose of Disbursement Computer Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860737</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="222.81"/></p>
<p>C. Full Name (Last, First, Middle Initial) Automatic Data Processing</p> <p>Mailing Address 11411 Red Run Blvd.</p> <p>City Owings Mills State MD Zip Code 21117</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-860924</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="50.17"/></p>

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

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NAME OF COMMITTEE (In Full)
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)
Alabama Democratic Party

Transaction ID: SB22-860692
Date of Disbursement

Mailing Address 205 20th St. North, Suite 915

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

City Birmingham State AL Zip Code 35203

Amount of Each Disbursement this Period

13000.00

Purpose of Disbursement
Transfer

--

Category/
Type

Candidate Name
Alabama Democratic Party

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

13000.00

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

13000.00

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

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

FOR LINE NUMBER:
(check only one)

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

<p>A. Full Name (Last, First, Middle Initial) Jill Derby for Congress</p> <p>Mailing Address 1298 Kingsbury Grade</p> <p>City State Zip Code Gardnerville NV 89460</p> <p>Purpose of Disbursement Voided Check <input type="checkbox"/></p> <p>Candidate Name Jill Derby for Congress</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: SB23-861015 Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period -2000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Martin Heinrich for Congress</p> <p>Mailing Address 2118 Central Avenue SE #71</p> <p>City State Zip Code Albuquerque NM 87106</p> <p>Purpose of Disbursement Voided Check <input type="checkbox"/></p> <p>Candidate Name Martin Heinrich for Congress</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: SB23-861017 Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period -100.00</p>
<p>C. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City State Zip Code Washington DC 20003</p> <p>Purpose of Disbursement In-House Fundraising Services <input type="checkbox"/></p> <p>Candidate Name Barbara Lee</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 09</p>	<p>Transaction ID: SB23-861069 Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 17.81</p>

SUBTOTAL of Disbursements This Page (optional) ▶

-2082.19

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

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

<p>A. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name Jerry McNerney</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 11</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-861070</p> <p>Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 7.68</p>
<p>B. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name Anna Eshoo</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 14</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-861071</p> <p>Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 7.17</p>
<p>C. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name Linda Sanchez</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 39</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-861072</p> <p>Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 8.36</p>

SUBTOTAL of Disbursements This Page (optional)	23.21
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)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name Joseph D Courtney</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-861073</p> <p>Date of Disbursement MM / DD / YYYY 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 8.81</p>
<p>B. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name Debbie Wasserman Schultz</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 20</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-861074</p> <p>Date of Disbursement MM / DD / YYYY 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 7.56</p>
<p>C. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name Ron Klein</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 22</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-861075</p> <p>Date of Disbursement MM / DD / YYYY 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 12.41</p>

SUBTOTAL of Disbursements This Page (optional)	28.78
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

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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)
Democratic Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name John Barrow</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: GA District: 12</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-861076</p> <p>Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 30.32</p>
<p>B. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name David Wayne Loeb sack</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IA District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-861077</p> <p>Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 11.42</p>
<p>C. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name William G. Foster</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 14</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-861078</p> <p>Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 37.40</p>

SUBTOTAL of Disbursements This Page (optional) ▶

79.14

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

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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)
Democratic Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee <hr/> Mailing Address 430 S Capitol Street, SE <hr/> City Washington State DC Zip Code 20003 Purpose of Disbursement In-House Fundraising Services Candidate Name Steny Hoyer Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 05 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-861079 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 9.90
B. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee <hr/> Mailing Address 430 S Capitol Street, SE <hr/> City Washington State DC Zip Code 20003 Purpose of Disbursement In-House Fundraising Services Candidate Name Michael H Michaud Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-861080 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 6.11
C. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee <hr/> Mailing Address 430 S Capitol Street, SE <hr/> City Washington State DC Zip Code 20003 Purpose of Disbursement In-House Fundraising Services Candidate Name Tim J. Walz Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 01 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-861081 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 8.08

SUBTOTAL of Disbursements This Page (optional)	▶	24.09
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

<p>A. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name James Oberstar</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 08</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-861082</p> <p>Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 9.58</p>
<p>B. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name Travis W. Childers</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-861083</p> <p>Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 12.40</p>
<p>C. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name Paul W. Hodes</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-861084</p> <p>Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 46.22</p>

SUBTOTAL of Disbursements This Page (optional)	68.20
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

Mailing Address 430 S Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
In-House Fundraising Services

Candidate Name
Nita Lowey

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 18

Transaction ID: SB23-861085

Date of Disbursement

01 / 30 / 2009

Amount of Each Disbursement this Period

6.08

B. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
In-House Fundraising Services

Candidate Name
Betty S Sutton

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: OH District: 13

Transaction ID: SB23-861086

Date of Disbursement

01 / 30 / 2009

Amount of Each Disbursement this Period

9.02

C. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
In-House Fundraising Services

Candidate Name
Zachary Space

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: OH District: 18

Transaction ID: SB23-861087

Date of Disbursement

01 / 30 / 2009

Amount of Each Disbursement this Period

25.94

SUBTOTAL of Disbursements This Page (optional) ►

41.04

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:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input 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 Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name Kurt Schrader</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 05</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-861088</p> <p>Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 12.53</p>
<p>B. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name Chaka Fattah</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-861089</p> <p>Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 5.27</p>
<p>C. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name Allyson Schwartz</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 13</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-861090</p> <p>Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 26.14</p>

SUBTOTAL of Disbursements This Page (optional)	43.94
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

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 Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name John Spratt</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 05</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-861091</p> <p>Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 8.51</p>
<p>B. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name James Matheson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-861092</p> <p>Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 7.08</p>
<p>C. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name Rick Larsen</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23-861093</p> <p>Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 6.07</p>

SUBTOTAL of Disbursements This Page (optional) ►

21.66

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)
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee			Transaction ID: SB23-861094	
	Mailing Address 430 S Capitol Street, SE			Date of Disbursement MM / DD / YYYY 01 / 30 / 2009	
City Washington		State DC	Zip Code 20003		Amount of Each Disbursement this Period 34.40
Purpose of Disbursement In-House Fundraising Services			Category/ Type		
Candidate Name Steve L Kagen			Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President				
State: WI		District: 08			

SUBTOTAL of Disbursements This Page (optional)	▶	34.40
TOTAL This Period (last page this line number only)	▶	-1717.73

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

Use separate schedule(s)
for each category 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 Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Scott Alarik <hr/> Mailing Address 183 Third Street #5 <hr/> City Cambridge State MA Zip Code 02141 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-860399 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 8 / 2 0 0 9	Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) Bette Tallen <hr/> Mailing Address 1170 Kenwood Avenue <hr/> City Winter Park State FL Zip Code 32789 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-860486 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 3 / 2 0 0 9	Amount of Each Disbursement this Period 10.00
C.	Full Name (Last, First, Middle Initial) James Maloney <hr/> Mailing Address 906 Oak Ridge Terrace <hr/> City Whiting State NJ Zip Code 08759 <hr/> Purpose of Disbursement Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-860487 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 3 / 2 0 0 9	Amount of Each Disbursement this Period 15.00

SUBTOTAL of Disbursements This Page (optional)	525.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input 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 Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Arthur Hertz Mailing Address 3195 Ponce de Leon Blvd. City Coral Gables State FL Zip Code 33134 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-860503 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 4 / 2 0 0 9 Amount of Each Disbursement this Period 2500.00 010 Category/ Type
B.	Full Name (Last, First, Middle Initial) Grace Adams Mailing Address 141 W Seneca St City Sherrill State NY Zip Code 13461 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-860507 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 9 Amount of Each Disbursement this Period 20.00 010 Category/ Type
C.	Full Name (Last, First, Middle Initial) Florence Hedges Mailing Address 1170 Kenwood Avenue City Winter Park State FL Zip Code 32789 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-860508 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 9 Amount of Each Disbursement this Period 50.00 010 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

2570.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input 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 Congressional Campaign Committee

<p>A. Full Name (Last, First, Middle Initial) Bonnie Beyer</p> <p>Mailing Address 13310 American Ranch Ct</p> <p>City Grass Valley State CA Zip Code 95949</p> <p>Purpose of Disbursement Contribution Refund Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB28A-860509 Date of Disbursement 01 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 20.00</p> <p>010 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Kathleen Bakke</p> <p>Mailing Address 532 Valley View Trl</p> <p>City Somerset State WI Zip Code 54025</p> <p>Purpose of Disbursement Contribution Refund Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB28A-860510 Date of Disbursement 01 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 15.00</p> <p>010 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) James Heck</p> <p>Mailing Address 12912 Terrace Springs Dr</p> <p>City Temple Terrace State FL Zip Code 33637</p> <p>Purpose of Disbursement Contribution Refund Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB28A-860721 Date of Disbursement 01 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 15.00</p> <p>010 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

50.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input 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 Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Nancy Hart Mailing Address 24 Harrison St City Providence State RI Zip Code 02909 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-860738 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 8 / 2 0 0 9	Amount of Each Disbursement this Period 20.00
B.	Full Name (Last, First, Middle Initial) Rock Morris Mailing Address 1110 Guildford St City Garland State TX Zip Code 75040 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-860739 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 8 / 2 0 0 9	Amount of Each Disbursement this Period 15.00
C.	Full Name (Last, First, Middle Initial) Wendy Pearson Mailing Address 12063 W. 83rd Ln City Arvada State CO Zip Code 80005 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-860752 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 0 9	Amount of Each Disbursement this Period 10.00

SUBTOTAL of Disbursements This Page (optional)	45.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input 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 Congressional Campaign Committee

A. Full Name (Last, First, Middle Initial) Wendy Pearson Mailing Address 12063 W. 83rd Ln City Arvada State CO Zip Code 80005 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-860753 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 0 9
	Amount of Each Disbursement this Period 10.00 Category/Type: 010
B. Full Name (Last, First, Middle Initial) Thomas Lewis Mailing Address POB 60976 City Palo Alto State CA Zip Code 94306 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-860755 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 0 9
	Amount of Each Disbursement this Period 50.00 Category/Type: 010
C. Full Name (Last, First, Middle Initial) Antonia Maheshwari Mailing Address 5145 Del Monte Dr City Houston State TX Zip Code 77056 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-860757 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 0 9
	Amount of Each Disbursement this Period 25.00 Category/Type: 010

SUBTOTAL of Disbursements This Page (optional)	85.00
TOTAL This Period (last page this line number only)	3275.00

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	FEC IDENTIFICATION NUMBER C C0000935
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Mack Crouse Group, LLC

Mailing Address
2001 N. Beauregard Street
Suite 420

City State Zip Code
Alexandria VA 22311

Purpose of Expenditure Category/Type
Literature 004

Name of Federal Candidate supported or Opposed by expenditure:
Paul J. Carmouche

Calendar Year-To-Date Per Election for Office Sought 5306.00

Full Name (Last, First, Middle, Initial) of Payee
Mack Crouse Group, LLC

Mailing Address
2001 N. Beauregard Street
Suite 420

City State Zip Code
Alexandria VA 22311

Purpose of Expenditure Category/Type
Literature 004

Name of Federal Candidate supported or Opposed by expenditure:
John Calvin Fleming, Jr.

Calendar Year-To-Date Per Election for Office Sought 5306.00

Date
MM / DD / YYYY
01 / 29 / 2009

Amount
2653.00

Transaction ID: SE-860750

Office Sought: House State: LA
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

Date of Dissemination 12/5/08;-
Last Minute IE disseminated less than 24 hrs prior to General Election

Date
MM / DD / YYYY
01 / 29 / 2009

Amount
2653.00

Transaction ID: SE-860751

Office Sought: House State: LA
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

Date of Dissemination 12/5/08;-
Last Minute IE disseminated less than 24 hrs prior to General Election

5306.00

(a) SUBTOTAL of Itemized Independent Expenditures	5306.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Jonathan S. Vogel
Signature

Date MM / DD / YYYY
08 / 03 / 2009

A. Form/Schedule : **SE**

Transaction ID :

The independent expenditures listed on Schedule E were not made in cooperation or consultation with any candidate, or any authorized committee or agent of any candidate, or made in concert with, or at the request or suggestion of, any candidate or any authorized committee or agent of any candidate. The expenditures are properly reported on Schedule E.

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	FEC IDENTIFICATION NUMBER C C0000935
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Dixon / Davis Media Group, LLC

Mailing Address
1028 33rd Street, NW
Suite 300

City Washington	State DC	Zip Code 20007
--------------------	-------------	-------------------

Purpose of Expenditure Media Production	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
James D. Esch

Calendar Year-To-Date Per Election for Office Sought	8930.00
---	---------

Date
M M / D D / Y Y Y Y
0 1 / 3 0 / 2 0 0 9

Amount
4465.00

Transaction ID: SE-860852

Office Sought: House State: NE
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

Date of Dissemination 10/14/08

Full Name (Last, First, Middle, Initial) of Payee
Dixon / Davis Media Group, LLC

Mailing Address
1028 33rd Street, NW
Suite 300

City Washington	State DC	Zip Code 20007
--------------------	-------------	-------------------

Purpose of Expenditure Media Production	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Lee Terry

Calendar Year-To-Date Per Election for Office Sought	8930.00
---	---------

Date
M M / D D / Y Y Y Y
0 1 / 3 0 / 2 0 0 9

Amount
4465.00

Transaction ID: SE-860853

Office Sought: House State: NE
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

Date of Dissemination 10/14/08

(a) SUBTOTAL of Itemized Independent Expenditures	8930.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Jonathan S. Vogel
Signature

Date M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	FEC IDENTIFICATION NUMBER C C0000935
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Dixon / Davis Media Group, LLC

Mailing Address
1028 33rd Street, NW
Suite 300

City Washington State DC Zip Code 20007

Purpose of Expenditure Media Production Category/Type 004

Name of Federal Candidate supported or Opposed by expenditure:
Ethan A Berkowitz

Calendar Year-To-Date Per Election for Office Sought 12825.00

Date 01 / 30 / 2009

Amount 1875.00
Transaction ID: SE-860854

Office Sought: House State: AK
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

Date of Dissemination 10/14/08

Full Name (Last, First, Middle, Initial) of Payee
Dixon / Davis Media Group, LLC

Mailing Address
1028 33rd Street, NW
Suite 300

City Washington State DC Zip Code 20007

Purpose of Expenditure Media Production Category/Type 004

Name of Federal Candidate supported or Opposed by expenditure:
Donald E. Young

Calendar Year-To-Date Per Election for Office Sought 12825.00

Date 01 / 30 / 2009

Amount 1875.00
Transaction ID: SE-860855

Office Sought: House State: AK
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

Date of Dissemination 10/14/08

(a) SUBTOTAL of Itemized Independent Expenditures	3750.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Jonathan S. Vogel
Signature

Date 08 / 03 / 2009

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	FEC IDENTIFICATION NUMBER C C0000935
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Dixon / Davis Media Group, LLC

Mailing Address
1028 33rd Street, NW
Suite 300

City State Zip Code
Washington DC 20007

Purpose of Expenditure Category/Type
Media Production 004

Name of Federal Candidate supported or Opposed by expenditure:
Judith W. Baker

Calendar Year-To-Date Per Election for Office Sought 5050.00

Date
MM / DD / YYYY
01 / 30 / 2009

Amount
2525.00

Transaction ID: SE-860856

Office Sought: House State: MO
 Senate District: 09
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

Date of Dissemination 10/14/08

Full Name (Last, First, Middle, Initial) of Payee
Dixon / Davis Media Group, LLC

Mailing Address
1028 33rd Street, NW
Suite 300

City State Zip Code
Washington DC 20007

Purpose of Expenditure Category/Type
Media Production 004

Name of Federal Candidate supported or Opposed by expenditure:
Blaine Luetkemeyer

Calendar Year-To-Date Per Election for Office Sought 5050.00

Date
MM / DD / YYYY
01 / 30 / 2009

Amount
2525.00

Transaction ID: SE-860857

Office Sought: House State: MO
 Senate District: 09
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

Date of Dissemination 10/14/08

(a) SUBTOTAL of Itemized Independent Expenditures	5050.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Jonathan S. Vogel
Signature

Date MM / DD / YYYY
08 / 03 / 2009

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	FEC IDENTIFICATION NUMBER C C0000935
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Dixon / Davis Media Group, LLC

Mailing Address
1028 33rd Street, NW
Suite 300

City Washington	State DC	Zip Code 20007
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Purpose of Expenditure Media Production	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Ethan A Berkowitz

Calendar Year-To-Date Per Election for Office Sought	12825.00
---	----------

Date
M M / D D / Y Y Y Y
0 1 / 3 0 / 2 0 0 9

Amount
4537.50

Transaction ID: SE-860858

Office Sought: House State: AK
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

Date of Dissemination 10/15/08

Full Name (Last, First, Middle, Initial) of Payee
Dixon / Davis Media Group, LLC

Mailing Address
1028 33rd Street, NW
Suite 300

City Washington	State DC	Zip Code 20007
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Purpose of Expenditure Media Production	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Donald E. Young

Calendar Year-To-Date Per Election for Office Sought	12825.00
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Date
M M / D D / Y Y Y Y
0 1 / 3 0 / 2 0 0 9

Amount
4537.50

Transaction ID: SE-860859

Office Sought: House State: AK
 Senate District: 00
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

Date of Dissemination 10/15/08

(a) SUBTOTAL of Itemized Independent Expenditures	9075.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Jonathan S. Vogel
Signature

Date M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	FEC IDENTIFICATION NUMBER C C0000935
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Dixon / Davis Media Group, LLC

Mailing Address
1028 33rd Street, NW
Suite 300

City Washington State DC Zip Code 20007

Purpose of Expenditure Media Production Category/Type 004

Name of Federal Candidate supported or Opposed by expenditure:
Steve L Kagen

Calendar Year-To-Date Per Election for Office Sought 8650.00

Date 01 / 30 / 2009

Amount 4325.00
Transaction ID: SE-860860

Office Sought: House State: WI
 Senate District: 08
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

Date of Dissemination 10/15/08

Full Name (Last, First, Middle, Initial) of Payee
Dixon / Davis Media Group, LLC

Mailing Address
1028 33rd Street, NW
Suite 300

City Washington State DC Zip Code 20007

Purpose of Expenditure Media Production Category/Type 004

Name of Federal Candidate supported or Opposed by expenditure:
John Gard

Calendar Year-To-Date Per Election for Office Sought 8650.00

Date 01 / 30 / 2009

Amount 4325.00
Transaction ID: SE-860861

Office Sought: House State: WI
 Senate District: 08
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

Date of Dissemination 10/15/08

(a) SUBTOTAL of Itemized Independent Expenditures	8650.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Jonathan S. Vogel
Signature

Date 08 / 03 / 2009

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	FEC IDENTIFICATION NUMBER C C0000935
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Dixon / Davis Media Group, LLC

Mailing Address
1028 33rd Street, NW
Suite 300

City State Zip Code
Washington DC 20007

Purpose of Expenditure Category/Type
Media Production 004

Name of Federal Candidate supported or Opposed by expenditure:
Martin Heinrich

Calendar Year-To-Date Per Election for Office Sought 8700.00

Date
MM / DD / YYYY
01 / 30 / 2009

Amount
4350.00

Transaction ID: SE-860862

Office Sought: House State: NM
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

Date of Dissemination 10/17/08

Full Name (Last, First, Middle, Initial) of Payee
Dixon / Davis Media Group, LLC

Mailing Address
1028 33rd Street, NW
Suite 300

City State Zip Code
Washington DC 20007

Purpose of Expenditure Category/Type
Media Production 004

Name of Federal Candidate supported or Opposed by expenditure:
Darren P White

Calendar Year-To-Date Per Election for Office Sought 8700.00

Date
MM / DD / YYYY
01 / 30 / 2009

Amount
4350.00

Transaction ID: SE-860863

Office Sought: House State: NM
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

Date of Dissemination 10/17/08

(a) SUBTOTAL of Itemized Independent Expenditures	8700.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	49461.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Jonathan S. Vogel
Signature

Date MM / DD / YYYY
08 / 03 / 2009

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee Democratic Congressional Campaign Committee
If YES, name the designating committee: Democratic National Committee & Democratic State Central Committee of Louisiana	Mailing Address 430 South Capitol Street, SE 2nd Floor City: Washington State: DC ZIP Code: 20003

Full Name (Last, First, Middle Initial) of Each Payee Kyra Jennings		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 128 Tennessee Avenue NE		Date MM / DD / YYYY 01 / 08 / 2009	
City: Washington State: DC ZIP Code: 20002	Name of Federal Candidate Supported: Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04
Aggregate General Election Expenditure for this Candidate ▶ 61732.49		Amount 27.64	
Transaction ID: SF-860419			

Full Name (Last, First, Middle Initial) of Each Payee Brent Parrish		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 719 D. St. NE Apt. 301		Date MM / DD / YYYY 01 / 08 / 2009	
City: Washington State: DC ZIP Code: 20002	Name of Federal Candidate Supported: Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04
Aggregate General Election Expenditure for this Candidate ▶ 61732.49		Amount 194.51	
Transaction ID: SF-860423			

Full Name (Last, First, Middle Initial) of Each Payee Bret Wask		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 224 Gretna Green Court		Date MM / DD / YYYY 01 / 08 / 2009	
City: Alexandria State: VA ZIP Code: 22304	Name of Federal Candidate Supported: Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04
Aggregate General Election Expenditure for this Candidate ▶ 61732.49		Amount 373.20	
Transaction ID: SF-860430			

SUBTOTAL of Expenditures This Page (optional)	595.35
TOTAL This Period (last page this line number only)	

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee Democratic Congressional Campaign Committee
If YES, name the designating committee: Democratic National Committee & Democratic State Central Committee of Louisiana	Mailing Address 430 South Capitol Street, SE 2nd Floor City: Washington State: DC ZIP Code: 20003

Full Name (Last, First, Middle Initial) of Each Payee Bret Wask		Purpose of Expenditure Telephones	001 Category/Type
Mailing Address 224 Gretna Green Court		Date MM / DD / YYYY 01 / 16 / 2009	
City Alexandria	State VA	ZIP Code 22304	Amount 556.59
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Transaction ID: SF-860527
Aggregate General Election Expenditure for this Candidate ▶		61732.49	

Full Name (Last, First, Middle Initial) of Each Payee Bank of America		Purpose of Expenditure Travel	002 Category/Type
Mailing Address P.O. Box 53155		See Attached Memo Entry	
City Phoenix	State AZ	ZIP Code 85072-3155	Date MM / DD / YYYY 01 / 16 / 2009
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 981.39
Aggregate General Election Expenditure for this Candidate ▶		61732.49	

Full Name (Last, First, Middle Initial) of Each Payee Starbucks		[MEMO ITEM]		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 4800 Line Avenue		Memo Entry			
City Shreveport	State LA	ZIP Code 71106	Date MM / DD / YYYY 12 / 08 / 2008		
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 7.98		
Aggregate General Election Expenditure for this Candidate ▶		0.00			

SUBTOTAL of Expenditures This Page (optional)	1537.98
TOTAL This Period (last page this line number only)	

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee Democratic Congressional Campaign Committee
If YES, name the designating committee: Democratic National Committee & Democratic State Central Committee of Louisiana	Mailing Address 430 South Capitol Street, SE 2nd Floor City: Washington State: DC ZIP Code: 20003

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Superior Bar & Grill	Purpose of Expenditure Travel
Mailing Address 6123 Line Avenue	Category/Type 002
City State ZIP Code Shreveport LA 71106	Memo Entry
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: LA District: 04	Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
Paul J. Carmouche	Amount 18.50
Aggregate General Election Expenditure for this Candidate ▶ 0.00	Transaction ID: SF-860541-20000

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Yeero Yeero	Purpose of Expenditure Travel
Mailing Address 4511 Youree Drive	Category/Type 002
City State ZIP Code Shreveport LA 71105	Memo Entry
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: LA District: 04	Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
Paul J. Carmouche	Amount 16.71
Aggregate General Election Expenditure for this Candidate ▶ 0.00	Transaction ID: SF-860541-30000

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] McAlister's Deli	Purpose of Expenditure Travel
Mailing Address 1671 East 70th	Category/Type 002
City State ZIP Code Shreveport LA 71105	Memo Entry
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: LA District: 04	Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
Paul J. Carmouche	Amount 8.45
Aggregate General Election Expenditure for this Candidate ▶ 0.00	Transaction ID: SF-860541-40000

SUBTOTAL of Expenditures This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee Democratic Congressional Campaign Committee
If YES, name the designating committee: Democratic National Committee & Democratic State Central Committee of Louisiana	Mailing Address 430 South Capitol Street, SE 2nd Floor City: Washington State: DC ZIP Code: 20003

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Strawns Eat Shop		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 125 Kings Highway		Memo Entry	
City Shreveport	State LA	ZIP Code 71104	Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 17.12
Aggregate General Election Expenditure for this Candidate ▶		Transaction ID: SF-860541-50000	

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Bistro Byronz		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 6104 Line Avenue		Memo Entry	
City Shreveport	State LA	ZIP Code 71106	Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 13.44
Aggregate General Election Expenditure for this Candidate ▶		Transaction ID: SF-860541-60000	

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] FJ Greenwood C's Out		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 9501 Greenwood Road		Memo Entry	
City Greenwood	State LA	ZIP Code 71033	Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 20.60
Aggregate General Election Expenditure for this Candidate ▶		Transaction ID: SF-860541-70000	

SUBTOTAL of Expenditures This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee Democratic Congressional Campaign Committee
If YES, name the designating committee: Democratic National Committee & Democratic State Central Committee of Louisiana	Mailing Address 430 South Capitol Street, SE 2nd Floor City: Washington State: DC ZIP Code: 20003

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Sonic	Purpose of Expenditure Travel
Mailing Address 219 Burt Boulevard	Category/Type 002
City: Benton State: LA ZIP Code: 71006	Memo Entry
Name of Federal Candidate Supported: Paul J. Carmouche Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: LA District: 04	Date MM / DD / YYYY 12 / 08 / 2008
Aggregate General Election Expenditure for this Candidate ▶ 0.00	Amount 7.40
	Transaction ID: SF-860541-80000

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Budget Rent A Car	Purpose of Expenditure Travel
Mailing Address 6 Sylvan Way	Category/Type 002
City: Parsippany State: NJ ZIP Code: 07054	Memo Entry
Name of Federal Candidate Supported: Paul J. Carmouche Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: LA District: 04	Date MM / DD / YYYY 12 / 08 / 2008
Aggregate General Election Expenditure for this Candidate ▶ 0.00	Amount 267.11
	Transaction ID: SF-860541-90000

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Exxonmobil	Purpose of Expenditure Travel
Mailing Address 12159 Highway 80	Category/Type 002
City: Dixie Inn State: LA ZIP Code: 71055	Memo Entry
Name of Federal Candidate Supported: Paul J. Carmouche Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: LA District: 04	Date MM / DD / YYYY 12 / 09 / 2008
Aggregate General Election Expenditure for this Candidate ▶ 0.00	Amount 22.59
	Transaction ID: SF-860541-100000

SUBTOTAL of Expenditures This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee			
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Full Name of Subordinate Committee Democratic Congressional Campaign Committee	
If YES, name the designating committee: Democratic National Committee & Democratic State Central Committee of Louisiana		Mailing Address 430 South Capitol Street, SE 2nd Floor City: Washington State: DC ZIP Code: 20003	
Full Name (Last, First, Middle Initial) of Each Payee Pmi BWI Esp Lot		Purpose of Expenditure Travel	
Mailing Address One Aviation Blvd		Category/Type 002	
City: Baltimore State: MD ZIP Code: 21240		Memo Entry	
Name of Federal Candidate Supported: Paul J. Carmouche		Date: 12 / 09 / 2008	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		Amount: 252.00	
State: LA District: 04		Transaction ID: SF-860541-110000	
Aggregate General Election Expenditure for this Candidate: 0.00			
Full Name (Last, First, Middle Initial) of Each Payee Starbucks		Purpose of Expenditure Travel	
Mailing Address 1979 Airline Drive		Category/Type 002	
City: Bossier City State: LA ZIP Code: 71112		Memo Entry	
Name of Federal Candidate Supported: Paul J. Carmouche		Date: 12 / 09 / 2008	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		Amount: 10.40	
State: LA District: 04		Transaction ID: SF-860541-120000	
Aggregate General Election Expenditure for this Candidate: 0.00			
Full Name (Last, First, Middle Initial) of Each Payee Texaco		Purpose of Expenditure Travel	
Mailing Address 484 South Pearson Road		Category/Type 002	
City: Pearl State: MS ZIP Code: 39208		Memo Entry	
Name of Federal Candidate Supported: Paul J. Carmouche		Date: 12 / 09 / 2008	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		Amount: 13.68	
State: LA District: 04		Transaction ID: SF-860541-130000	
Aggregate General Election Expenditure for this Candidate: 0.00			
SUBTOTAL of Expenditures This Page (optional)		0.00	
TOTAL This Period (last page this line number only)			

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee Democratic Congressional Campaign Committee
If YES, name the designating committee: Democratic National Committee & Democratic State Central Committee of Louisiana	Mailing Address 430 South Capitol Street, SE 2nd Floor City: Washington State: DC ZIP Code: 20003

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Waffle House	Purpose of Expenditure Travel
Mailing Address 2123 Old Minden Road	Category/Type 002
City State ZIP Code Bossier City LA 71112	Memo Entry
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: LA District: 04	Date MM / DD / YYYY 12 / 09 / 2008
Paul J. Carmouche	Amount 13.61
Aggregate General Election Expenditure for this Candidate ▶ 0.00	Transaction ID: SF-860541-140000

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Hilton Hotel	Purpose of Expenditure Travel
Mailing Address 104 Market Street	Category/Type 002
City State ZIP Code Shreveport LA 71101	Memo Entry
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: LA District: 04	Date MM / DD / YYYY 12 / 09 / 2008
Paul J. Carmouche	Amount 291.80
Aggregate General Election Expenditure for this Candidate ▶ 0.00	Transaction ID: SF-860541-150000

Full Name (Last, First, Middle Initial) of Each Payee Bank of America	Purpose of Expenditure Travel
Mailing Address P.O. Box 53155	Category/Type 002
City State ZIP Code Phoenix AZ 85072-3155	See Attached Memo Entry
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: LA District: 04	Date MM / DD / YYYY 01 / 16 / 2009
Paul J. Carmouche	Amount 1584.43
Aggregate General Election Expenditure for this Candidate ▶ 61732.49	Transaction ID: SF-860552

SUBTOTAL of Expenditures This Page (optional)	1584.43
TOTAL This Period (last page this line number only)	

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee Democratic Congressional Campaign Committee
If YES, name the designating committee: Democratic National Committee & Democratic State Central Committee of Louisiana	Mailing Address 430 South Capitol Street, SE 2nd Floor City: Washington State: DC ZIP Code: 20003

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Shreveport Convention Center	Purpose of Expenditure Travel
Mailing Address 400 Caddo Street	Purpose of Expenditure Category/Type 002
City: Shreveport State: LA ZIP Code: 71101	Memo Entry
Name of Federal Candidate Supported: Paul J. Carmouche Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: LA District: 04	Date: MM/DD/YYYY 12/08/2008
Aggregate General Election Expenditure for this Candidate ▶ 0.00	Amount: 3.00
	Transaction ID: SF-860552-10000

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Strawns Eat Shop	Purpose of Expenditure Travel
Mailing Address 125 Kings Highway	Purpose of Expenditure Category/Type 002
City: Shreveport State: LA ZIP Code: 71104	Memo Entry
Name of Federal Candidate Supported: Paul J. Carmouche Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: LA District: 04	Date: MM/DD/YYYY 12/08/2008
Aggregate General Election Expenditure for this Candidate ▶ 0.00	Amount: 10.69
	Transaction ID: SF-860552-20000

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Wendys	Purpose of Expenditure Travel
Mailing Address 113 E Bert Kouns Loop	Purpose of Expenditure Category/Type 002
City: Shreveport State: LA ZIP Code: 71106	Memo Entry
Name of Federal Candidate Supported: Paul J. Carmouche Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: LA District: 04	Date: MM/DD/YYYY 12/08/2008
Aggregate General Election Expenditure for this Candidate ▶ 0.00	Amount: 6.60
	Transaction ID: SF-860552-30000

SUBTOTAL of Expenditures This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee Democratic Congressional Campaign Committee
If YES, name the designating committee: Democratic National Committee & Democratic State Central Committee of Louisiana	Mailing Address 430 South Capitol Street, SE 2nd Floor City: Washington State: DC ZIP Code: 20003

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Bistro Byronz		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 6104 Line Avenue		Memo Entry	
City Shreveport	State LA	ZIP Code 71106	Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 23.08
Aggregate General Election Expenditure for this Candidate ▶		Transaction ID: SF-860552-40000	

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Mcdonald's		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 210 Benton Road		Memo Entry	
City Bossier City	State LA	ZIP Code 71111	Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 4.25
Aggregate General Election Expenditure for this Candidate ▶		Transaction ID: SF-860552-50000	

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Holiday Inn		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 2015 Old Minden Road		Memo Entry	
City Bossier City	State LA	ZIP Code 71111	Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 993.17
Aggregate General Election Expenditure for this Candidate ▶		Transaction ID: SF-860552-60000	

SUBTOTAL of Expenditures This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee Democratic Congressional Campaign Committee
If YES, name the designating committee: Democratic National Committee & Democratic State Central Committee of Louisiana	Mailing Address 430 South Capitol Street, SE 2nd Floor City: Washington State: DC ZIP Code: 20003

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Chevron		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 3790 Industrial Drive		Memo Entry	
City Shreveport	State LA	ZIP Code 71109	Date M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 6.22
Aggregate General Election Expenditure for this Candidate ▶ 0.00		Transaction ID: SF-860552-70000	

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Hertz Rent-A-Car		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 5103 Hollywood Avenue		Memo Entry	
City Shreveport	State LA	ZIP Code 71109	Date M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 275.80
Aggregate General Election Expenditure for this Candidate ▶ 0.00		Transaction ID: SF-860552-80000	

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Houston To Go		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 2800 North Terminal Road		Memo Entry	
City Houston	State TX	ZIP Code 77032	Date M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 10.79
Aggregate General Election Expenditure for this Candidate ▶ 0.00		Transaction ID: SF-860552-90000	

SUBTOTAL of Expenditures This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee Democratic Congressional Campaign Committee
If YES, name the designating committee: Democratic National Committee & Democratic State Central Committee of Louisiana	Mailing Address 430 South Capitol Street, SE 2nd Floor City: Washington State: DC ZIP Code: 20003

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Ruby Tuesday		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 7320 Youree Drive		Memo Entry	
City Shreveport	State LA	ZIP Code 71105	Date M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 14.60
Aggregate General Election Expenditure for this Candidate ▶		Transaction ID: SF-860552-100000	

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Continental		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 1600 Smith Street		Memo Entry	
City Houston	State TX	ZIP Code 77002	Date M M / D D / Y Y Y Y 1 2 / 1 0 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 15.00
Aggregate General Election Expenditure for this Candidate ▶		Transaction ID: SF-860552-110000	

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Preflight - BWI Airport		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 1200 Stoney Run Road		Memo Entry	
City Hanover	State MD	ZIP Code 21076	Date M M / D D / Y Y Y Y 1 2 / 1 0 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 199.50
Aggregate General Election Expenditure for this Candidate ▶		Transaction ID: SF-860552-120000	

SUBTOTAL of Expenditures This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee Democratic Congressional Campaign Committee
If YES, name the designating committee: Democratic National Committee & Democratic State Central Committee of Louisiana	Mailing Address 430 South Capitol Street, SE 2nd Floor City: Washington State: DC ZIP Code: 20003

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Chili's Grill		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 3025 East Texas Street		Memo Entry	
City Bossier City	State LA	ZIP Code 71111	Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 21.73
Aggregate General Election Expenditure for this Candidate ▶		Transaction ID: SF-860552-130000	

Full Name (Last, First, Middle Initial) of Each Payee Bank of America		Purpose of Expenditure Travel	002 Category/Type
Mailing Address P.O. Box 53155		See Attached Memo Entry	
City Phoenix	State AZ	ZIP Code 85072-3155	Date M M / D D / Y Y Y Y 0 1 / 1 6 / 2 0 0 9
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 549.30
Aggregate General Election Expenditure for this Candidate ▶		Transaction ID: SF-860555	

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Agent Fee		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 4124 S McCan Ct		Memo Entry	
City Springfield	State MO	ZIP Code 65804	Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 5.00
Aggregate General Election Expenditure for this Candidate ▶		Transaction ID: SF-860555-10000	

SUBTOTAL of Expenditures This Page (optional)	549.30
TOTAL This Period (last page this line number only)	

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee Democratic Congressional Campaign Committee
If YES, name the designating committee: Democratic National Committee & Democratic State Central Committee of Louisiana	Mailing Address 430 South Capitol Street, SE 2nd Floor City: Washington State: DC ZIP Code: 20003

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Starbucks	Purpose of Expenditure Travel
Mailing Address 4800 Line Avenue	Category/Type 002
City State ZIP Code Shreveport LA 71106	Memo Entry
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: LA District: 04	Date MM / DD / YYYY 12 / 08 / 2008
Paul J. Carmouche	Amount 12.99
Aggregate General Election Expenditure for this Candidate ▶ 0.00	Transaction ID: SF-860555-20000

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Superior Bar & Grill	Purpose of Expenditure Travel
Mailing Address 6123 Line Avenue	Category/Type 002
City State ZIP Code Shreveport LA 71106	Memo Entry
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: LA District: 04	Date MM / DD / YYYY 12 / 08 / 2008
Paul J. Carmouche	Amount 16.33
Aggregate General Election Expenditure for this Candidate ▶ 0.00	Transaction ID: SF-860555-30000

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Sonic	Purpose of Expenditure Travel
Mailing Address 628 East Kings Highway	Category/Type 002
City State ZIP Code Shreveport LA 71106	Memo Entry
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: LA District: 04	Date MM / DD / YYYY 12 / 08 / 2008
Paul J. Carmouche	Amount 4.87
Aggregate General Election Expenditure for this Candidate ▶ 0.00	Transaction ID: SF-860555-40000

SUBTOTAL of Expenditures This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee Democratic Congressional Campaign Committee
If YES, name the designating committee: Democratic National Committee & Democratic State Central Committee of Louisiana	Mailing Address 430 South Capitol Street, SE 2nd Floor City: Washington State: DC ZIP Code: 20003

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Bistro Byronz	Purpose of Expenditure Travel
Mailing Address 6104 Line Avenue	Category/Type 002
City State ZIP Code Shreveport LA 71106	Memo Entry
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: LA District: 04	Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
Paul J. Carmouche	Amount 21.80
Aggregate General Election Expenditure for this Candidate ▶ 0.00	Transaction ID: SF-860555-50000

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Chevron	Purpose of Expenditure Travel
Mailing Address 7414 Mansfield Road	Category/Type 002
City State ZIP Code Shreveport LA 71109	Memo Entry
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: LA District: 04	Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
Paul J. Carmouche	Amount 6.89
Aggregate General Election Expenditure for this Candidate ▶ 0.00	Transaction ID: SF-860555-60000

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Hilton Hotel	Purpose of Expenditure Travel
Mailing Address 104 Market Street	Category/Type 002
City State ZIP Code Shreveport LA 71101	Memo Entry
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: LA District: 04	Date M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 8
Paul J. Carmouche	Amount 298.32
Aggregate General Election Expenditure for this Candidate ▶ 0.00	Transaction ID: SF-860555-70000

SUBTOTAL of Expenditures This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee Democratic Congressional Campaign Committee
If YES, name the designating committee: Democratic National Committee & Democratic State Central Committee of Louisiana	Mailing Address 430 South Capitol Street, SE 2nd Floor City: Washington State: DC ZIP Code: 20003

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Airtranair		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 1800 Phoenix Boulevard		Memo Entry	
City College Park	State GA	ZIP Code 30349	Date M M / D D / Y Y Y Y 1 2 / 1 0 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 145.00
Aggregate General Election Expenditure for this Candidate ▶		Transaction ID: SF-860555-80000	

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Airtranair		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 1800 Phoenix Boulevard		Memo Entry	
City College Park	State GA	ZIP Code 30349	Date M M / D D / Y Y Y Y 1 2 / 1 0 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 15.00
Aggregate General Election Expenditure for this Candidate ▶		Transaction ID: SF-860555-90000	

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Ez Go 44		Purpose of Expenditure Travel	002 Category/Type
Mailing Address Rt 2 H E Bailey		Memo Entry	
City Walters	State OK	ZIP Code 73572	Date M M / D D / Y Y Y Y 1 2 / 1 0 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 13.54
Aggregate General Election Expenditure for this Candidate ▶		Transaction ID: SF-860555-100000	

SUBTOTAL of Expenditures This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee Democratic Congressional Campaign Committee
If YES, name the designating committee: Democratic National Committee & Democratic State Central Committee of Louisiana	Mailing Address 430 South Capitol Street, SE 2nd Floor City: Washington State: DC ZIP Code: 20003

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Shell Oil		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 9235 John W Carpenter Fwy		Memo Entry	
City: Dallas	State: TX	ZIP Code: 75247	Date: 12 / 11 / 2008
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA	District: 04
Aggregate General Election Expenditure for this Candidate	0.00		
		Amount	9.56
		Transaction ID: SF-860555-110000	

Full Name (Last, First, Middle Initial) of Each Payee Bank of America		Purpose of Expenditure Travel	002 Category/Type
Mailing Address P.O. Box 53155		See Attached Memo Entry	
City: Phoenix	State: AZ	ZIP Code: 85072-3155	Date: 01 / 16 / 2009
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA	District: 04
Aggregate General Election Expenditure for this Candidate	61732.49		
		Amount	384.78
		Transaction ID: SF-860561	

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Hertz Rent-A-Car		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 2424 East 38th Street		Memo Entry	
City: Dallas	State: TX	ZIP Code: 75261	Date: 12 / 08 / 2008
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA	District: 04
Aggregate General Election Expenditure for this Candidate	0.00		
		Amount	24.79
		Transaction ID: SF-860561-10000	

SUBTOTAL of Expenditures This Page (optional)	384.78
TOTAL This Period (last page this line number only)	

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
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(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee Democratic Congressional Campaign Committee
If YES, name the designating committee: Democratic National Committee & Democratic State Central Committee of Louisiana	Mailing Address 430 South Capitol Street, SE 2nd Floor City: Washington State: DC ZIP Code: 20003

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Bistro Byronz		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 6104 Line Avenue		Memo Entry	
City Shreveport	State LA	ZIP Code 71106	Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 24.60
Aggregate General Election Expenditure for this Candidate ▶ 0.00		Transaction ID: SF-860561-20000	

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Superior Bar & Grill		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 6123 Line Avenue		Memo Entry	
City Shreveport	State LA	ZIP Code 71106	Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 12.80
Aggregate General Election Expenditure for this Candidate ▶ 0.00		Transaction ID: SF-860561-30000	

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Horseshoe Casino Hotel		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 711 Horseshoe Bouelvard		Memo Entry	
City Bossier City	State LA	ZIP Code 71111	Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 58.59
Aggregate General Election Expenditure for this Candidate ▶ 0.00		Transaction ID: SF-860561-40000	

SUBTOTAL of Expenditures This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
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(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee Democratic Congressional Campaign Committee
If YES, name the designating committee: Democratic National Committee & Democratic State Central Committee of Louisiana	Mailing Address 430 South Capitol Street, SE 2nd Floor City: Washington State: DC ZIP Code: 20003

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Bistro Byronz	Purpose of Expenditure Travel
Mailing Address 6104 Line Avenue	Category/Type 002
City State ZIP Code Shreveport LA 71106	Memo Entry
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: LA District: 04	Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
Paul J. Carmouche	Amount 24.08
Aggregate General Election Expenditure for this Candidate ▶ 0.00	Transaction ID: SF-860561-50000

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] American Air	Purpose of Expenditure Travel
Mailing Address 4255 Amon Carter Boulevard	Category/Type 002
City State ZIP Code Dallas TX 74063	Memo Entry
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: LA District: 04	Date M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 8
Paul J. Carmouche	Amount 15.00
Aggregate General Election Expenditure for this Candidate ▶ 0.00	Transaction ID: SF-860561-60000

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Raceway	Purpose of Expenditure Travel
Mailing Address 325 West 70th Street	Category/Type 002
City State ZIP Code Shreveport LA 71106	Memo Entry
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: LA District: 04	Date M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 8
Paul J. Carmouche	Amount 13.93
Aggregate General Election Expenditure for this Candidate ▶ 0.00	Transaction ID: SF-860561-70000

SUBTOTAL of Expenditures This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee Democratic Congressional Campaign Committee
If YES, name the designating committee: Democratic National Committee & Democratic State Central Committee of Louisiana	Mailing Address 430 South Capitol Street, SE 2nd Floor City: Washington State: DC ZIP Code: 20003

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Superior Bar & Grill		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 6125 Line Avenue		Memo Entry	
City Shreveport	State LA	ZIP Code 71106	Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 33.41
Aggregate General Election Expenditure for this Candidate ▶		Transaction ID: SF-860569-10000	

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Yeero Yeero		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 4511 Youree Drive		Memo Entry	
City Shreveport	State LA	ZIP Code 71105	Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 9.98
Aggregate General Election Expenditure for this Candidate ▶		Transaction ID: SF-860569-20000	

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Agent Fee		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 10440 North Central Expressway		Memo Entry	
City Dallas	State TX	ZIP Code 75231	Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 5.00
Aggregate General Election Expenditure for this Candidate ▶		Transaction ID: SF-860569-30000	

SUBTOTAL of Expenditures This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee Democratic Congressional Campaign Committee
If YES, name the designating committee: Democratic National Committee & Democratic State Central Committee of Louisiana	Mailing Address 430 South Capitol Street, SE 2nd Floor City: Washington State: DC ZIP Code: 20003

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Brookshire's		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 5828 Line Avenue		Memo Entry	
City Shreveport	State LA	ZIP Code 71106	Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 7.57
Aggregate General Election Expenditure for this Candidate ▶ 0.00		Transaction ID: SF-860569-40000	

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Horseshoe Casino Hotel		Purpose of Expenditure Travel	002 Category/Type
Mailing Address PO Box 5637		Memo Entry	
City Bossier City	State LA	ZIP Code 71111	Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 1.00
Aggregate General Election Expenditure for this Candidate ▶ 0.00		Transaction ID: SF-860569-50000	

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] McAlister's Deli		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 1671 East 70th Street		Memo Entry	
City Shreveport	State LA	ZIP Code 71105	Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 6.51
Aggregate General Election Expenditure for this Candidate ▶ 0.00		Transaction ID: SF-860569-60000	

SUBTOTAL of Expenditures This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee Democratic Congressional Campaign Committee
If YES, name the designating committee: Democratic National Committee & Democratic State Central Committee of Louisiana	
Mailing Address 430 South Capitol Street, SE 2nd Floor	
City Washington	State DC ZIP Code 20003

Full Name (Last, First, Middle Initial) of Each Payee Shell Oil	[MEMO ITEM]	Purpose of Expenditure Travel	002 Category/Type
Mailing Address 762 Periermount		Memo Entry	
City Shreveport	State LA	ZIP Code 71105	Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 19.34
Aggregate General Election Expenditure for this Candidate ▶		Transaction ID: SF-860569-70000	

Full Name (Last, First, Middle Initial) of Each Payee Starbucks	[MEMO ITEM]	Purpose of Expenditure Travel	002 Category/Type
Mailing Address 4800 Line Avenue		Memo Entry	
City Shreveport	State LA	ZIP Code 71106	Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 7.56
Aggregate General Election Expenditure for this Candidate ▶		Transaction ID: SF-860569-80000	

Full Name (Last, First, Middle Initial) of Each Payee Starbucks	[MEMO ITEM]	Purpose of Expenditure Travel	002 Category/Type
Mailing Address 4800 Line Avenue		Memo Entry	
City Shreveport	State LA	ZIP Code 71106	Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 8
Name of Federal Candidate Supported Paul J. Carmouche	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 04	Amount 2.12
Aggregate General Election Expenditure for this Candidate ▶		Transaction ID: SF-860569-90000	

SUBTOTAL of Expenditures This Page (optional)		0.00	
TOTAL This Period (last page this line number only)			

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NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee Democratic Congressional Campaign Committee
If YES, name the designating committee: Democratic National Committee & Democratic State Central Committee of Louisiana	Mailing Address 430 South Capitol Street, SE 2nd Floor City: Washington State: DC ZIP Code: 20003

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Avis Rent-A-Car	Purpose of Expenditure Travel
Mailing Address 5207 Monkhouse Drive	Category/Type 002
City State ZIP Code Shreveport LA 71109	Memo Entry
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: LA District: 04	Date MM / DD / YYYY 12 / 08 / 2008
Paul J. Carmouche	Amount 345.68
Aggregate General Election Expenditure for this Candidate ▶ 0.00	Transaction ID: SF-860569-130000

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Starbucks	Purpose of Expenditure Travel
Mailing Address 4800 Line Avenue	Category/Type 002
City State ZIP Code Shreveport LA 71106	Memo Entry
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: LA District: 04	Date MM / DD / YYYY 12 / 09 / 2008
Paul J. Carmouche	Amount 2.13
Aggregate General Election Expenditure for this Candidate ▶ 0.00	Transaction ID: SF-860569-140000

Full Name (Last, First, Middle Initial) of Each Payee [MEMO ITEM] Sun Studios Ca	Purpose of Expenditure Travel
Mailing Address 2491 Winchester Road	Category/Type 002
City State ZIP Code Memphis TN 38116	Memo Entry
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: LA District: 04	Date MM / DD / YYYY 12 / 09 / 2008
Paul J. Carmouche	Amount 16.42
Aggregate General Election Expenditure for this Candidate ▶ 0.00	Transaction ID: SF-860569-150000

SUBTOTAL of Expenditures This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	
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If YES, name the designating committee: Democratic National Committee & Democratic State Central Committee of Louisiana	Mailing Address 430 South Capitol Street, SE 2nd Floor City: Washington State: DC ZIP Code: 20003

Full Name (Last, First, Middle Initial) of Each Payee Hilton Hotel		[MEMO ITEM]		Purpose of Expenditure Travel	002 Category/Type
Mailing Address 104 Market Street		Memo Entry		Date M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 8	
City	State	ZIP Code		Amount	
Shreveport	LA	71101		291.26	
Name of Federal Candidate Supported	Office Sought:	<input checked="" type="checkbox"/> House	State: LA	District: 04	
Paul J. Carmouche		<input type="checkbox"/> Senate	Presidential		
Aggregate General Election Expenditure for this Candidate		0.00		Transaction ID: SF-860569-160000	

Full Name (Last, First, Middle Initial) of Each Payee Chad Horrell				Purpose of Expenditure Travel	002 Category/Type
Mailing Address 272 A Kentucky Avenue, SE		Memo Entry		Date M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 9	
City	State	ZIP Code		Amount	
Washington	DC	20003		62.57	
Name of Federal Candidate Supported	Office Sought:	<input checked="" type="checkbox"/> House	State: LA	District: 04	
Paul J. Carmouche		<input type="checkbox"/> Senate	Presidential		
Aggregate General Election Expenditure for this Candidate		61732.49		Transaction ID: SF-860653	

Full Name (Last, First, Middle Initial) of Each Payee Lauren Dikis				Purpose of Expenditure Travel	002 Category/Type
Mailing Address 3105 11th St., NW		Memo Entry		Date M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 9	
City	State	ZIP Code		Amount	
Washington	DC	20010		119.08	
Name of Federal Candidate Supported	Office Sought:	<input checked="" type="checkbox"/> House	State: LA	District: 04	
Paul J. Carmouche		<input type="checkbox"/> Senate	Presidential		
Aggregate General Election Expenditure for this Candidate		61732.49		Transaction ID: SF-860654	

SUBTOTAL of Expenditures This Page (optional)	181.65
TOTAL This Period (last page this line number only)	5674.38