

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

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

Democratic Properties Corporation-Federal

ADDRESS (number and street)

430 South Capitol Street, SE

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20003

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00384479

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☒

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

03

01

2010

through

03

31

2010

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

Andrew Tobias

Signature of Treasurer

Electronically Filed by Andrew Tobias

Date

04

20

2010

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

FEC Form 3X (Rev. 02/2003)

2 / 24

Write or Type Committee Name  
Democratic Properties Corporation-Federal

Report Covering the Period: From: 

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	364819.84
(b) Cash on Hand at Beginning of Reporting Period .....	311241.63	
(c) Total Receipts (from Line 19) .....	103893.00	341466.50
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	415134.63	706286.34
7. Total Disbursements (from Line 31) .....	296293.31	587445.02
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	118841.32	118841.32
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) .....	0.00	

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

### For further information contact:

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

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

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

3 / 24

Write or Type Committee Name

Democratic Properties Corporation-Federal

Report Covering the Period:

From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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) .....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	0.00	0.00
12. Transfers From Affiliated/Other Party Committees .....	103293.00	336716.50
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) .....	600.00	4750.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	103893.00	341466.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	103893.00	341466.50

## DETAILED SUMMARY PAGE

of Disbursements

4 / 24

FEC Form 3X (Rev. 02/2003)

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.....	312397.01	595288.44	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	312397.01	595288.44	
22. Transfers to Affiliated/Other Party Committees.....	-16103.70	-7843.42	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	296293.31	587445.02	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	296293.31	587445.02	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 24

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	0.00	0.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	312397.01	595288.44
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	600.00	4750.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	311797.01	590538.44

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 6 / 24

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 SOUTH CAPITOL STREET, S.E.

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

160744.00

Date of Receipt

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

Transaction ID: SA12-3059

Amount of Each Receipt this Period

29618.00

Property Lease

**B.**

Full Name (Last, First, Middle Initial)

DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 SOUTH CAPITOL STREET, S.E.

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

160744.00

Date of Receipt

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

Transaction ID: SA12-3057

Amount of Each Receipt this Period

4218.00

Property Lease

**C.**

Full Name (Last, First, Middle Initial)

DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 SOUTH CAPITOL STREET, S.E.

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

160744.00

Date of Receipt

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

Transaction ID: SA12-3061

Amount of Each Receipt this Period

59236.00

Property Lease

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

93072.00

**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 7 / 24

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 SOUTH CAPITOL STREET, S.E.

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

160744.00

Date of Receipt

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

Transaction ID: SA12-3058

Amount of Each Receipt this Period

4218.00

Property Lease

**B.**

Full Name (Last, First, Middle Initial)

DNC SERVICES CORPORATION

Mailing Address 430 SOUTH CAPITAL ST, S.E

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

175972.50

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 6 / 2 0 1 0

Transaction ID: SA12-3056

Amount of Each Receipt this Period

6003.00

Property Lease

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

10221.00

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

103293.00

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

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

FOR LINE NUMBER: PAGE 8 / 24

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

New Democrat Coalition

Mailing Address 607 14th Street NW  
Suite 800

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 ▼

600.00

Date of Receipt

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

Transaction ID: SA15-3060

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Lucie K. Gikovich

Mailing Address 514 Seward Square SE

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 ▼

300.00

Date of Receipt

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

Transaction ID: SA15-3091

Amount of Each Receipt this Period

300.00

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

600.00

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

600.00



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 24

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

**A.** Full Name (Last, First, Middle Initial)  
**WASTE MANAGEMENT OF MD**

Mailing Address PO BOX 13648

City PHILADELPHIA State PA Zip Code 19101-3648

Purpose of Disbursement  
Bulk Trash Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-3036

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1914.24

**B.** Full Name (Last, First, Middle Initial)  
**TOLIN MECHANICAL SYSTEMS COMP**

Mailing Address 12005 EAST 45TH AVENUE

City DENVER State CO Zip Code 80239

Purpose of Disbursement  
HVAC Repairs

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-3037

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4409.73

**C.** Full Name (Last, First, Middle Initial)  
**TOLIN MECHANICAL SYSTEMS COMP**

Mailing Address 12005 EAST 45TH AVENUE

City DENVER State CO Zip Code 80239

Purpose of Disbursement  
Engineer OT Hours Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-3038

Date of Disbursement

/   /

Amount of Each Disbursement this Period

945.00

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

7268.97

**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)

PAGE 10 / 24

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

**A.** Full Name (Last, First, Middle Initial)  
SCHINDLER ELEVATOR CORP

Mailing Address P.O BOX 93050

City  
CHICAGO

State  
IL

Zip Code  
60673-3050

Purpose of Disbursement  
Elevator Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-3039

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2431.27

**B.** Full Name (Last, First, Middle Initial)  
Pepco Energy Service Inc.

Mailing Address P.O. Box 659408

City  
San Antonio

State  
TX

Zip Code  
78265

Purpose of Disbursement  
Electric Bill

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-3040

Date of Disbursement

/   /

Amount of Each Disbursement this Period

21510.05

**C.** Full Name (Last, First, Middle Initial)  
GSI- Gali Services

Mailing Address 6931 Arlington Rd.  
Suite B

City  
Bethesda

State  
MD

Zip Code  
20814

Purpose of Disbursement  
Cleaning Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-3041

Date of Disbursement

/   /

Amount of Each Disbursement this Period

152.22

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

24093.54

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 24

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) GSI- Gali Services</p> <p>Mailing Address 6931 Arlington Rd. Suite B</p> <p>City Bethesda State MD Zip Code 20814</p> <p>Purpose of Disbursement Cleaning 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><b>Transaction ID:</b> SB21B-3042</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period  <div> <div></div> <div>9131.90</div> </div> </p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) DTM COPORATION</p> <p>Mailing Address 1320 FENWICK LANE STE 700</p> <p>City SILVER SPRING State MD Zip Code 20910</p> <p>Purpose of Disbursement Security</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><b>Transaction ID:</b> SB21B-3043</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period  <div> <div></div> <div>11457.60</div> </div> </p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) D.C. TREASURER</p> <p>Mailing Address OFFICE OF TAX &amp; REVENUE P.O. BOX 601 BEN FRANLIN N.W.</p> <p>City WASHINGTON State DC Zip Code 20044</p> <p>Purpose of Disbursement Taxes Payment</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><b>Transaction ID:</b> SB21B-3044</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period  <div> <div></div> <div>100.00</div> </div> </p>

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

**20689.50**

**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)

PAGE 12 / 24

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

GOVERNMENT OF THE D. C. REAL PROPERTY TAX BILL

Mailing Address OFFICE OF TAX AND REVENUE  
P.O. BOX 98095

City WASHINGTON State DC Zip Code 20090-8095

Purpose of Disbursement

Taxes Payment

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-3045

Date of Disbursement

03 / 11 / 2010

Amount of Each Disbursement this Period

119243.37

**B.**

Full Name (Last, First, Middle Initial)

Martek Global Services

Mailing Address 7920 Norfolk Avenue, Suite 920

City Bethesda State MD Zip Code 20814

Purpose of Disbursement

Production: Creative

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-3046

Date of Disbursement

03 / 11 / 2010

Amount of Each Disbursement this Period

1925.00

**C.**

Full Name (Last, First, Middle Initial)

PEPCO ENERGY SERVICES

Mailing Address PO BOX 4863

City TRENTON State NJ Zip Code 08650-4863

Purpose of Disbursement

Electric Bill

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-3047

Date of Disbursement

03 / 11 / 2010

Amount of Each Disbursement this Period

6151.65

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

127320.02

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 13 / 24

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

AT&amp;T Mobility

Mailing Address PO Box 6463

City  
Carol StreamState  
ILZip Code  
60197-6463Purpose of Disbursement  
Telephone

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-3048

Date of Disbursement

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

Amount of Each Disbursement this Period

84.10

**B.**

Full Name (Last, First, Middle Initial)

Spotem Inc. Telecommunication Division

Mailing Address 5131 Haybridge Rd.

City  
CharlotteState  
NCZip Code  
28269Purpose of Disbursement  
Equipment Purchases

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-3052

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	1	0

Amount of Each Disbursement this Period

37310.00

**C.**

Full Name (Last, First, Middle Initial)

BANK OF AMERICA

Mailing Address P.O. BOX 1232

City  
CHARLOTTEState  
NCZip Code  
28201-1232Purpose of Disbursement  
Bank Charges

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-3090

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	1	0

Amount of Each Disbursement this Period

150.74

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

37544.84

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 14 / 24

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

Carefirst Bluecross Blueshield

Mailing Address PO Box 79749

City  
Baltimore

State  
MD

Zip Code  
21279

Purpose of Disbursement  
Healthcare Insurance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-3053

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2098.58

**B.**

Full Name (Last, First, Middle Initial)

Guardian

Mailing Address PO Box 95101

City  
Chicago

State  
IL

Zip Code  
60694-5101

Purpose of Disbursement  
Healthcare Insurance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-3054

Date of Disbursement

/   /

Amount of Each Disbursement this Period

132.42

**C.**

Full Name (Last, First, Middle Initial)

Eagle Mast & Floor Products

Mailing Address 932 Hugerford Drive  
Suite 37B

City  
Rockville

State  
MD

Zip Code  
20850

Purpose of Disbursement  
Building Drywall and Painting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-3055

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10153.50

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

12384.50

**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)

PAGE 15 / 24

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

WESTERN PEST SERVICES

Mailing Address 202 PERRY PKWY

City  
GAITHERSBURG

State  
MD

Zip Code  
20877

Purpose of Disbursement  
Exterminating maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-3062

Date of Disbursement

/   /

Amount of Each Disbursement this Period

388.49

**B.**

Full Name (Last, First, Middle Initial)

WORLD RECYCLING COMPANY

Mailing Address 5600 COLUMBIA PARK ROAD

City  
CHEVERLY

State  
MD

Zip Code  
20785

Purpose of Disbursement  
Recycle Removal

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-3063

Date of Disbursement

/   /

Amount of Each Disbursement this Period

600.00

**C.**

Full Name (Last, First, Middle Initial)

LEVEL GREEN LANDSCAPING

Mailing Address 139 12TH STREET, SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
Landscaping Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-3064

Date of Disbursement

/   /

Amount of Each Disbursement this Period

397.50

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

1385.99

**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)

PAGE 16 / 24

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

Eagle Mast & Floor Products

Mailing Address 932 Hugerford Drive  
Suite 37B

City State Zip Code  
Rockville MD 20850

Purpose of Disbursement  
Building Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-3065

Date of Disbursement

/   /

Amount of Each Disbursement this Period

80.32

**B.**

Full Name (Last, First, Middle Initial)

D.C. TREASURER D.C GOVT, REAL PROP.TAX BILL

Mailing Address OFFICE OF TAX AND REVENUE  
P.O BOX 98095

City State Zip Code  
WASHINGTON DC 20090-8095

Purpose of Disbursement  
Taxes Payment

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-3066

Date of Disbursement

/   /

Amount of Each Disbursement this Period

7251.76

**C.**

Full Name (Last, First, Middle Initial)

Synina Pugh

Mailing Address 2359 Ontario Rd. NW  
201

City State Zip Code  
Washington DC 20009

Purpose of Disbursement  
Building Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-3067

Date of Disbursement

/   /

Amount of Each Disbursement this Period

8.29

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

7340.37

**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)

PAGE 17 / 24

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Synina Pugh</p> <p>Mailing Address 2359 Ontario Rd. NW 201</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Building 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><b>Transaction ID:</b> SB21B-3068</p> <p>Date of Disbursement 03 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 19.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Synina Pugh</p> <p>Mailing Address 2359 Ontario Rd. NW 201</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Building 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><b>Transaction ID:</b> SB21B-3069</p> <p>Date of Disbursement 03 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 14.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Synina Pugh</p> <p>Mailing Address 2359 Ontario Rd. NW 201</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Building 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><b>Transaction ID:</b> SB21B-3070</p> <p>Date of Disbursement 03 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 14.00</p>

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

47.00

**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 18 / 24

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

<b>A.</b> Full Name (Last, First, Middle Initial) Xpedex Mailing Address P.O. Box 403565	<b>Transaction ID:</b> SB21B-3071 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 9 / 2 0 1 0</div> </div>
City Atlanta State GA Zip Code 30384 Purpose of Disbursement Building Maintenance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>324.61</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Rasevic Snow Service Mailing Address 5200 River Rd. City Bethesda State MD Zip Code 20816 Purpose of Disbursement Landscaping Maintenance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-3072 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 9 / 2 0 1 0</div> </div> <b>Amount of Each Disbursement this Period</b> <div>34810.29</div>
<b>C.</b> Full Name (Last, First, Middle Initial) GSI- Gali Services Mailing Address 6931 Arlington Rd. Suite B City Bethesda State MD Zip Code 20814 Purpose of Disbursement Cleaning Maintenance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-3073 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 9 / 2 0 1 0</div> </div> <b>Amount of Each Disbursement this Period</b> <div>9131.90</div>

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

**44266.80**

**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 19 / 24

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

GSI- Gali Services

Mailing Address 6931 Arlington Rd.  
Suite B

City Bethesda State MD Zip Code 20814

Purpose of Disbursement  
Cleaning Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-3074

Date of Disbursement

/   /

Amount of Each Disbursement this Period

9131.90

**B.**

Full Name (Last, First, Middle Initial)

GSI- Gali Services

Mailing Address 6931 Arlington Rd.  
Suite B

City Bethesda State MD Zip Code 20814

Purpose of Disbursement  
Cleaning Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-3075

Date of Disbursement

/   /

Amount of Each Disbursement this Period

456.65

**C.**

Full Name (Last, First, Middle Initial)

COMCAST

Mailing Address PO BOX 3005

City SOUTHEASTERN State PA Zip Code 19398

Purpose of Disbursement  
Cable Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B-3076

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1586.07

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

11174.62

**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 20 / 24

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

East Coast Fire Protection

Mailing Address 7526 Connelly Drive  
Suite L

City Hanover State MD Zip Code 20003

Purpose of Disbursement  
Office Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-3079

Date of Disbursement

03 / 31 / 2010

Amount of Each Disbursement this Period

3350.00

**B.**

Full Name (Last, First, Middle Initial)

Modern Door Equipment

Mailing Address 4301 Charles Crossing Drive

City White Plains State MD Zip Code 20695

Purpose of Disbursement  
Building Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-3081

Date of Disbursement

03 / 31 / 2010

Amount of Each Disbursement this Period

655.00

**C.**

Full Name (Last, First, Middle Initial)

TOLIN MECHANICAL SYSTEMS COMP

Mailing Address 12005 EAST 45TH AVENUE

City DENVER State CO Zip Code 80239

Purpose of Disbursement  
Engineer/Architect Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-3082

Date of Disbursement

03 / 31 / 2010

Amount of Each Disbursement this Period

10428.60

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

14433.60

**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)

PAGE 21 / 24

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

A.

Full Name (Last, First, Middle Initial)

GILBERT & WOLFAND, P.C

Mailing Address 2201 WISCONSIN AVENUE, N.W

City  
WASHINGTON

State  
DC

Zip Code  
20007

Purpose of Disbursement  
Financial Consulting Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-3080

Date of Disbursement

03 / 31 / 2010

Amount of Each Disbursement this Period

821.00

B.

Full Name (Last, First, Middle Initial)

Genesis Security System LLC

Mailing Address 20459 Seneca Meadows Parkway

City  
Germantown

State  
MD

Zip Code  
20876

Purpose of Disbursement  
Security Monitoring Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-3083

Date of Disbursement

03 / 31 / 2010

Amount of Each Disbursement this Period

2889.93

C.

Full Name (Last, First, Middle Initial)

Genesis Security System LLC

Mailing Address 20459 Seneca Meadows Parkway

City  
Germantown

State  
MD

Zip Code  
20876

Purpose of Disbursement  
Security Monitoring Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B-3084

Date of Disbursement

03 / 31 / 2010

Amount of Each Disbursement this Period

223.50

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

3934.43

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 22 / 24

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

**A.**

Full Name (Last, First, Middle Initial)

GRAINGER

Mailing Address DEPT 896-856120316

City  
PALATINE

State  
IL

Zip Code  
60038-0001

Purpose of Disbursement  
Building Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-3085

Date of Disbursement

/   /

Amount of Each Disbursement this Period

11.00

**B.**

Full Name (Last, First, Middle Initial)

GRAINGER

Mailing Address DEPT 896-856120316

City  
PALATINE

State  
IL

Zip Code  
60038-0001

Purpose of Disbursement  
Building Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-3086

Date of Disbursement

/   /

Amount of Each Disbursement this Period

328.22

**C.**

Full Name (Last, First, Middle Initial)

GRAINGER

Mailing Address DEPT 896-856120316

City  
PALATINE

State  
IL

Zip Code  
60038-0001

Purpose of Disbursement  
Building Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-3087

Date of Disbursement

/   /

Amount of Each Disbursement this Period

17.26

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

356.48

**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 23 / 24

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

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NAME OF COMMITTEE (In Full)

Democratic Properties Corporation-Federal

A.

Full Name (Last, First, Middle Initial)

Genesis Security System LLC

Mailing Address 20459 Seneca Meadows Parkway

City State Zip Code  
Germantown MD 20876

Purpose of Disbursement  
Security Monitoring Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-3088

Date of Disbursement

/   /

Amount of Each Disbursement this Period

156.35

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

156.35

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

312397.01

# **SCHEDULE 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 24 / 24

<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 Properties Corporation-Federal

A.

Full Name (Last, First, Middle Initial)

DNC SERVICES CORPORATION

Mailing Address 430 SOUTH CAPITAL ST, S.E

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
Salaries

Candidate Name  
DNC SERVICES CORPORATION

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB22-3078

Date of Disbursement

/   /

Amount of Each Disbursement this Period

-16103.70

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

-16103.70

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

-16103.70