

# 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  
Progressive Americans for Democracy

ADDRESS (number and street) PO Box 26246  
 Check if different than previously reported. (ACC)  
Eugene OR 97402-0464

2. **FEC IDENTIFICATION NUMBER** C00417493  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)  
**CITY** **STATE** **ZIP CODE**

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 07 01 2009 through 12 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 Don Corson  
Signature of Treasurer Electronically Filed by Don Corson Date 01 29 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**

Write or Type Committee Name  
Progressive Americans for Democracy

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

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		16631.83
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	19736.57									
(c) Total Receipts (from Line 19) .....	22508.24	27524.33								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	42244.81	44156.16								
7. Total Disbursements (from Line 31) .....	29478.38	31389.73								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	12766.43	12766.43								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
Progressive Americans for Democracy

Report Covering the Period: From:    To:

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) .....	22500.00	27500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	22500.00	27500.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	8.24	24.33
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)) .....	22508.24	27524.33
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	22508.24	27524.33

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	1978.38	3889.73
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1978.38	3889.73
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	27500.00	27500.00
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))..	29478.38	31389.73
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	29478.38	31389.73

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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) .....	22500.00	27500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	22500.00	27500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1978.38	3889.73
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1978.38	3889.73

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 17  
(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)  
Progressive Americans for Democracy

**A.** Full Name (Last, First, Middle Initial)  
International Brotherhood Of Electrical Workers Committee On Political Education  
Mailing Address 900 7th Street NW

City Washington State DC Zip Code 20001-3886

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 07 / 27 / 2009  
**Transaction ID:** SA11C-6-287-c  
 Amount of Each Receipt this Period: 5000.00

**B.** Full Name (Last, First, Middle Initial)  
Machinists Non-Partisan Political League  
Mailing Address 9000 Machinists Place

City Upper Marlboro State MD Zip Code 20772-2675

FEC ID number of contributing federal political committee. **C** C00002469

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 11 / 02 / 2009  
**Transaction ID:** SA11C-8-310-c  
 Amount of Each Receipt this Period: 5000.00

**C.** Full Name (Last, First, Middle Initial)  
Carpenters' Legislative Improvement Committee  
Mailing Address 101 Consitution Ave

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00001016

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 11 / 18 / 2009  
**Transaction ID:** SA11C-7-314-c  
 Amount of Each Receipt this Period: 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 15000.00

**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: <span style="float: right;">PAGE 7 / 17</span>
	(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	

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)  
Progressive Americans for Democracy

**A.**

Full Name (Last, First, Middle Initial) National Air Traffic Controllers Association PAC		Date of Receipt
Mailing Address 1325 Massachusetts Avenue NW		<input type="text" value="11"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
City	State	Zip Code
Washington	DC	20005-4171
FEC ID number of contributing federal political committee.		Transaction ID: SA11C-9-318-c
<input type="text" value="C"/> <input type="text" value="C00238725"/>		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="5000.00"/>

**B.**

Full Name (Last, First, Middle Initial) Air Line Pilots Association PAC		Date of Receipt
Mailing Address 1625 Massachusetts Avenue NW		<input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
City	State	Zip Code
Washington	DC	20036-2212
FEC ID number of contributing federal political committee.		Transaction ID: SA11C-34-320-c
<input type="text" value="C"/> <input type="text" value="C00035451"/>		Amount of Each Receipt this Period
		<input type="text" value="2500.00"/>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="2500.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="7500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="22500.00"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Americans for Democracy

A. Complete Campaigns	Full Name (Last, First, Middle Initial)	Transaction ID: SB21B-21-282-e	
	Mailing Address 3635 Ruffin Road Floor 3	Date of Disbursement	
	City San Diego State CA Zip Code 92123-1880	<input type="text" value="07"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>	
	Purpose of Disbursement computer expense	Amount of Each Disbursement this Period	<input type="text" value="172.50"/>
	Candidate Name		<input type="text" value="001"/>
	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. Adrienne Colaizzi	Full Name (Last, First, Middle Initial)	Transaction ID: SB21B-2-286-e	
	Mailing Address PO Box 26246	Date of Disbursement	
	City Eugene State OR Zip Code 97402-0464	<input type="text" value="07"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>	
	Purpose of Disbursement Payroll: July 09	Amount of Each Disbursement this Period	<input type="text" value="34.93"/>
	Candidate Name		<input type="text" value="001"/>
	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. Jennifer Gilbreath	Full Name (Last, First, Middle Initial)	Transaction ID: SB21B-35-285-e	
	Mailing Address 259 E 13th Avenue Apt. 106	Date of Disbursement	
	City Eugene State OR Zip Code 97401-3260	<input type="text" value="07"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>	
	Purpose of Disbursement Payroll: July 09	Amount of Each Disbursement this Period	<input type="text" value="38.35"/>
	Candidate Name		<input type="text" value="001"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="245.78"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 17

<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)  
Progressive Americans for Democracy

<b>A.</b>	Full Name (Last, First, Middle Initial) SAIF Corporation Mailing Address 400 High Street SE City Salem State OR Zip Code 97312-0700 Purpose of Disbursement Workmans Comp 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-10-288-e Date of Disbursement MM / DD / YYYY 07 / 29 / 2009 Amount of Each Disbursement this Period 224.12 Category/Type 001
<b>B.</b>	Full Name (Last, First, Middle Initial) Internal Revenue Service Mailing Address PO Box 660264 City Dallas State TX Zip Code 75266-0264 Purpose of Disbursement payroll tax expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-12-294-e Date of Disbursement MM / DD / YYYY 07 / 31 / 2009 Amount of Each Disbursement this Period 56.43 Category/Type 001
<b>C.</b>	Full Name (Last, First, Middle Initial) Complete Campaigns Mailing Address 3635 Ruffin Road Floor 3 City San Diego State CA Zip Code 92123-1880 Purpose of Disbursement computer expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-21-291-e Date of Disbursement MM / DD / YYYY 08 / 03 / 2009 Amount of Each Disbursement this Period 150.00 Category/Type 001

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

**430.55**

**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

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)  
Progressive Americans for Democracy

A.	Full Name (Last, First, Middle Initial) Eugene Bookkeeping & Tax, Inc.  Mailing Address 1600 Valley River Drive Suite 170  City Eugene State OR Zip Code 97401-2160  Purpose of Disbursement bookkeeping service expense Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-14-292-e Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: right;">75.00</td> </tr> </table> 001 Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	3		2	0	0	9	75.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		0	3		2	0	0	9														
75.00																							
B.	Full Name (Last, First, Middle Initial) Adrienne Colaizzi  Mailing Address PO Box 26246  City Eugene State OR Zip Code 97402-0464  Purpose of Disbursement payroll: Aug 09 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-2-295-e Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: right;">34.93</td> </tr> </table> 001 Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	4		2	0	0	9	34.93
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		1	4		2	0	0	9														
34.93																							
C.	Full Name (Last, First, Middle Initial) Jennifer Gilbreath  Mailing Address 259 E 13th Avenue Apt. 106  City Eugene State OR Zip Code 97401-3260  Purpose of Disbursement payroll: Aug 09 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-35-296-e Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: right;">38.35</td> </tr> </table> 001 Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	4		2	0	0	9	38.35
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		1	4		2	0	0	9														
38.35																							

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<table border="1"> <tr> <td style="text-align: right;"><b>148.28</b></td> </tr> </table>	<b>148.28</b>
<b>148.28</b>		
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<table border="1"> <tr> <td style="text-align: right;"> </td> </tr> </table>	

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

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

FOR LINE NUMBER: (check only one)

<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)  
Progressive Americans for Democracy

A. Complete Campaigns	Full Name (Last, First, Middle Initial)	Transaction ID: SB21B-21-297-e	
	Mailing Address 3635 Ruffin Road Floor 3	Date of Disbursement 09 / 02 / 2009	
	City San Diego State CA Zip Code 92123-1880	Amount of Each Disbursement this Period 172.50	
	Purpose of Disbursement computer expense	001 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. Adrienne Colaizzi	Full Name (Last, First, Middle Initial)	Transaction ID: SB21B-2-299-e	
	Mailing Address PO Box 26246	Date of Disbursement 09 / 14 / 2009	
	City Eugene State OR Zip Code 97402-0464	Amount of Each Disbursement this Period 34.93	
	Purpose of Disbursement payroll: Sept 09	001 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. Jennifer Gilbreath	Full Name (Last, First, Middle Initial)	Transaction ID: SB21B-35-300-e	
	Mailing Address 259 E 13th Avenue Apt. 106	Date of Disbursement 09 / 14 / 2009	
	City Eugene State OR Zip Code 97401-3260	Amount of Each Disbursement this Period 38.35	
	Purpose of Disbursement payroll: Sept 09	001 Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>245.78</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input 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)  
Progressive Americans for Democracy

<b>A.</b>	Full Name (Last, First, Middle Initial) Complete Campaigns  Mailing Address 3635 Ruffin Road Floor 3  City San Diego State CA Zip Code 92123-1880  Purpose of Disbursement computer expense Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-21-303-e Date of Disbursement 10 / 02 / 2009  Amount of Each Disbursement this Period 172.50  001 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Adrienne Colaizzi  Mailing Address PO Box 26246  City Eugene State OR Zip Code 97402-0464  Purpose of Disbursement payroll: Oct 09 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-2-305-e Date of Disbursement 10 / 14 / 2009  Amount of Each Disbursement this Period 34.93  001 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Jennifer Gilbreath  Mailing Address 259 E 13th Avenue Apt. 106  City Eugene State OR Zip Code 97401-3260  Purpose of Disbursement payroll: Oct 09 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-35-306-e Date of Disbursement 10 / 14 / 2009  Amount of Each Disbursement this Period 38.35  001 Category/ Type

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

**245.78**

**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

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NAME OF COMMITTEE (In Full)  
Progressive Americans for Democracy

A.	Full Name (Last, First, Middle Initial) Internal Revenue Service	Transaction ID: SB21B-12-308-e Date of Disbursement
	Mailing Address PO Box 660264	<input type="text" value="10"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Dallas State TX Zip Code 75266-0264	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll tax expense Candidate Name	<input type="text" value="56.43"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<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) Complete Campaigns	Transaction ID: SB21B-21-309-e Date of Disbursement
	Mailing Address 3635 Ruffin Road Floor 3	<input type="text" value="11"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City San Diego State CA Zip Code 92123-1880	Amount of Each Disbursement this Period
	Purpose of Disbursement computer expense Candidate Name	<input type="text" value="172.50"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<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) Adrienne Colaizzi	Transaction ID: SB21B-2-312-e Date of Disbursement
	Mailing Address PO Box 26246	<input type="text" value="11"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Eugene State OR Zip Code 97402-0464	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll: Nov. 09 Candidate Name	<input type="text" value="34.93"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="263.86"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Americans for Democracy

A.	Full Name (Last, First, Middle Initial) Jennifer Gilbreath	Transaction ID: SB21B-35-313-e Date of Disbursement 11 / 13 / 2009
	Mailing Address 259 E 13th Avenue Apt. 106	Amount of Each Disbursement this Period 38.35
	City Eugene State OR Zip Code 97401-3260	
	Purpose of Disbursement payroll: Nov. 09 Candidate Name	001 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) Eugene Bookkeeping & Tax, Inc.	Transaction ID: SB21B-14-317-e Date of Disbursement 11 / 18 / 2009
	Mailing Address 1600 Valley River Drive Suite 170	Amount of Each Disbursement this Period 75.00
	City Eugene State OR Zip Code 97401-2160	
	Purpose of Disbursement bookkeeping service expense Candidate Name	001 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) Complete Campaigns	Transaction ID: SB21B-21-319-e Date of Disbursement 12 / 02 / 2009
	Mailing Address 3635 Ruffin Road Floor 3	Amount of Each Disbursement this Period 172.50
	City San Diego State CA Zip Code 92123-1880	
	Purpose of Disbursement computer expense Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>285.85</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input 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)  
Progressive Americans for Democracy

<b>A.</b> Full Name (Last, First, Middle Initial) Adrienne Colaizzi Mailing Address PO Box 26246 City Eugene State OR Zip Code 97402-0464 Purpose of Disbursement payroll: Dec. 09 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-2-322-e Date of Disbursement 12 / 14 / 2009
	Amount of Each Disbursement this Period 34.93 Category/Type: 001
<b>B.</b> Full Name (Last, First, Middle Initial) Jennifer Gilbreath Mailing Address 259 E 13th Avenue Apt. 106 City Eugene State OR Zip Code 97401-3260 Purpose of Disbursement payroll: Dec. 09 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-35-323-e Date of Disbursement 12 / 14 / 2009
	Amount of Each Disbursement this Period 38.35 Category/Type: 001

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

73.28

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

1939.16

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Americans for Democracy

A.	Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee	Transaction ID: SB23-17-283-e Date of Disbursement
	Mailing Address 430 S Capitol Street SE	<input type="text" value="07"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Washington State DC Zip Code 20003-4024	Amount of Each Disbursement this Period
	Purpose of Disbursement political contribution	<input type="text" value="10000.00"/>
	Candidate Name Democratic Congressional Campaign Committee	<input type="text" value="011"/> Category/Type
	Office Sought: <input 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: District:	

B.	Full Name (Last, First, Middle Initial) Democratic Party Of Oregon	Transaction ID: SB23-118-289-e Date of Disbursement
	Mailing Address 232 NE 9th Avenue Suite 105	<input type="text" value="07"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Portland State OR Zip Code 97232-2915	Amount of Each Disbursement this Period
	Purpose of Disbursement political contribution	<input type="text" value="5000.00"/>
	Candidate Name Democratic Party Of Oregon	<input type="text" value="011"/> Category/Type
	Office Sought: <input 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: District:	

C.	Full Name (Last, First, Middle Initial) Schauer For Congress	Transaction ID: SB23-120-301-e Date of Disbursement
	Mailing Address PO Box 100	<input type="text" value="09"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Battle Creek State MI Zip Code 49016-0100	Amount of Each Disbursement this Period
	Purpose of Disbursement political contribution	<input type="text" value="1000.00"/>
	Candidate Name Mark Hamilton Schauer	<input type="text" value="011"/> Category/Type
	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: MI District: 07	

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

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Americans for Democracy

A.	Full Name (Last, First, Middle Initial) Perriello For Congress	Transaction ID: SB23-122-302-e Date of Disbursement
	Mailing Address PO Box 306	<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2009"/>
	City Ivy State VA Zip Code 22945-0306	Amount of Each Disbursement this Period
	Purpose of Disbursement political contribution	<input type="text" value="1000.00"/>
	Candidate Name Thomas Stuart Price Perriello	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Capuano For Senate Committee	Transaction ID: SB23-129-336-e Date of Disbursement
	Mailing Address 172 Central Street	<input type="text" value="11"/> / <input type="text" value="18"/> / <input type="text" value="2009"/>
	City Somerville State MA Zip Code 02145-2741	Amount of Each Disbursement this Period
	Purpose of Disbursement political contribution	<input type="text" value="500.00"/>
	Candidate Name Michael E Capuano	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee	Transaction ID: SB23-17-316-e Date of Disbursement
	Mailing Address 430 S Capitol Street SE	<input type="text" value="11"/> / <input type="text" value="18"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20003-4024	Amount of Each Disbursement this Period
	Purpose of Disbursement political contribution	<input type="text" value="10000.00"/>
	Candidate Name Democratic Congressional Campaign Committee	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="11500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="27500.00"/>