

# 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  
New Democrat Coalition Political Action Committee AKA NDC PAC

ADDRESS (number and street) 607 14th Street, NW, Suite 800  
 Check if different than previously reported. (ACC)  
Washington DC 20005

2. **FEC IDENTIFICATION NUMBER** C00409730  
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 06 01 2006 through 06 30 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer D. Adam Smith

Signature of Treasurer Electronically Filed by D. Adam Smith Date 07 20 2006

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
New Democrat Coalition Political Action Committee AKA NDC PAC

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		48222.84
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	110124.99									
(c) Total Receipts (from Line 19) .....	36000.00	230561.25								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	146124.99	278784.09								
7. Total Disbursements (from Line 31) .....	62854.84	195513.94								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	83270.15	83270.15								
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**

Write or Type Committee Name

New Democrat Coalition Political Action Committee AKA NDC PAC

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	2500.00	13500.00
(i) Itemized (use Schedule A) .....	0.00	275.00
(ii) Unitemized .....	2500.00	13775.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	33500.00	211786.25
(c) Other Political Committees (such as PACs) .....	36000.00	225561.25
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
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	5000.00
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)) .....	36000.00	230561.25
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	36000.00	230561.25

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	18654.84	93313.94
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	18654.84	93313.94
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	44000.00	102000.00
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) .....	200.00	200.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	200.00	200.00
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))..	62854.84	195513.94
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	62854.84	195513.94

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	36000.00	225561.25
34. Total Contribution Refunds (from Line 28(d)) .....	200.00	200.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	35800.00	225361.25
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	18654.84	93313.94
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	18654.84	93313.94

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<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)  
New Democrat Coalition Political Action Committee AKA NDC PAC

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

Mailing Address 2995 Woodside Road #400-402

City State Zip Code  
Woodside CA 94062

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

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
06 / 15 / 2006

**Transaction ID: C169**

Amount of Each Receipt this Period  
2500.00

\* Earmarked Contribution:  
See Below

**B.** Full Name (Last, First, Middle Initial)  
Technology Network (TechNet) Federal PAC

Mailing Address 2600 East Bayshore Road, 1st Floor

City State Zip Code  
Palo Alto CA 94303

FEC ID number of contributing federal political committee. **C** C00328369

Name of Employer Occupation  
Conduit total: \$2,500.00

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
MM / DD / YYYY  
06 / 15 / 2006

**Transaction ID: C169B**

Amount of Each Receipt this Period  
2500.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	2500.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 19
	<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)  
New Democrat Coalition Political Action Committee AKA NDC PAC

Full Name (Last, First, Middle Initial) <b>A. Occidental Petroleum Corporation PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 01 / 2006	
Mailing Address 10889 Wilshire Blvd. Suite 600		<b>Transaction ID: C166</b>	
City State Zip Code Los Angeles CA 90024	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C C00083857</b>			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B. Cisco Systems, Inc. Federal PAC</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006	
Mailing Address 20 Park Road Suite E		<b>Transaction ID: C175</b>	
City State Zip Code Burlingame CA 94010	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C C00362707</b>			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C. HSBC North America Political Action Committee</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006	
Mailing Address 2700 Sanders Road		<b>Transaction ID: C174</b>	
City State Zip Code Prospect Heights IL 60070	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C C00033423</b>			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 19
	<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)  
New Democrat Coalition Political Action Committee AKA NDC PAC

Full Name (Last, First, Middle Initial) <b>A. American Insurance Association PAC</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6
Mailing Address 1130 Connecticut Avenue, NW Suite 1000		<b>Transaction ID: C172</b> Amount of Each Receipt this Period 1000.00
City Washington State DC Zip Code 20036		
FEC ID number of contributing federal political committee. <b>C</b> C00103143		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Committee to Elect Artur Davis to Congress</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address P.O. Box 1845		<b>Transaction ID: C170</b> Amount of Each Receipt this Period 2500.00
City Birmingham State AL Zip Code 35201		
FEC ID number of contributing federal political committee. <b>C</b> C00347872		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>C. Adam Smith for Congress Committee</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address P.O. Box 23626		<b>Transaction ID: C171</b> Amount of Each Receipt this Period 5000.00
City Federal Way State WA Zip Code 98093		
FEC ID number of contributing federal political committee. <b>C</b> C00304709		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	8500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 19
	<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)  
New Democrat Coalition Political Action Committee AKA NDC PAC

**A.** Full Name (Last, First, Middle Initial)  
NEA Fund for Children & Public Education

Mailing Address 1201 16th Street, NW  
Suite 420

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00003251

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  
 0 6 / 1 2 / 2 0 0 6

**Transaction ID: C168**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Merck Employees Political Action Committee

Mailing Address 601 Pennsylvania Avenue, NW

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00097485

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  
 0 6 / 3 0 / 2 0 0 6

**Transaction ID: C173**

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	10000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	33500.00

# 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)  
New Democrat Coalition Political Action Committee AKA NDC PAC

Full Name (Last, First, Middle Initial) <b>A. Emily Caponetti</b>		<b>Transaction ID: D160</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address 323 Anderson Hall 4400 Massachusetts Avenue, NW		Amount of Each Disbursement this Period 35.00
City Washington State DC Zip Code 20016	Purpose of Disbursement Reimbursement - Travel 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Emily Caponetti</b>		<b>Transaction ID: D134</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address 323 Anderson Hall 4400 Massachusetts Avenue, NW		Amount of Each Disbursement this Period 192.38
City Washington State DC Zip Code 20016	Purpose of Disbursement Salary 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Emily Caponetti</b>		<b>Transaction ID: D147</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 323 Anderson Hall 4400 Massachusetts Avenue, NW		Amount of Each Disbursement this Period 263.32
City Washington State DC Zip Code 20016	Purpose of Disbursement Salary 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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	490.70
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE 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 11 / 19

<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)  
New Democrat Coalition Political Action Committee AKA NDC PAC

Full Name (Last, First, Middle Initial) <b>A. Helen Milby &amp; Company</b>		<b>Transaction ID: D157</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 6
Mailing Address 12502 Brooke Lane		Amount of Each Disbursement this Period 200.33
City Upper Marlboro State MD Zip Code 20772	Category/ Type	
Purpose of Disbursement Catering		
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Helen Milby &amp; Company</b>		<b>Transaction ID: D146</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address 12502 Brooke Lane		Amount of Each Disbursement this Period 6000.00
City Upper Marlboro State MD Zip Code 20772	Category/ Type	
Purpose of Disbursement Fundraising Consulting 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Andrea Mietus</b>		<b>Transaction ID: D161</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6
Mailing Address 10 Frances Green Court		Amount of Each Disbursement this Period 1487.40
City North Potomac State MD Zip Code 20878	Category/ Type	
Purpose of Disbursement Event Consulting 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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7687.73
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 12 / 19

<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)  
New Democrat Coalition Political Action Committee AKA NDC PAC

Full Name (Last, First, Middle Initial) <b>A. NGP Software</b>		<b>Transaction ID: D156</b> Date of Disbursement 06 / 07 / 2006
Mailing Address 1101 Vermont Avenue, NW Suite 710		Amount of Each Disbursement this Period 1750.00
City Washington State DC Zip Code 20005	Purpose of Disbursement Database Services 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Perkins Coie, LLP</b>		<b>Transaction ID: D158</b> Date of Disbursement 06 / 06 / 2006
Mailing Address 607 14th Street, NW Suite 800		Amount of Each Disbursement this Period 859.90
City Washington State DC Zip Code 20005	Purpose of Disbursement Legal & Accounting Services 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Perkins Coie, LLP</b>		<b>Transaction ID: D133</b> Date of Disbursement 06 / 13 / 2006
Mailing Address 607 14th Street, NW Suite 800		Amount of Each Disbursement this Period 6700.76
City Washington State DC Zip Code 20005	Purpose of Disbursement Legal & Accounting Services 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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	9310.66
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE 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)  
New Democrat Coalition Political Action Committee AKA NDC PAC

Full Name (Last, First, Middle Initial) <b>A. Perkins Coie, LLP</b>		<b>Transaction ID: D150</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address 607 14th Street, NW Suite 800		Amount of Each Disbursement this Period 913.55
City Washington State DC Zip Code 20005	Purpose of Disbursement Legal & Accounting Services 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		<b>Transaction ID: D162</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address 3060 Williams Drive Suite 200		Amount of Each Disbursement this Period 101.01
City Fairfax State VA Zip Code 22031	Purpose of Disbursement Payroll Services 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Paychex</b>		<b>Transaction ID: D118</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address 3060 Williams Drive Suite 200		Amount of Each Disbursement this Period 60.49
City Fairfax State VA Zip Code 22031	Purpose of Disbursement Payroll Taxes 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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1075.05
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE 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 / 19

<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)  
New Democrat Coalition Political Action Committee AKA NDC PAC

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Transaction ID: D148	
Mailing Address 3060 Williams Drive Suite 200		Date of Disbursement 06 / 30 / 2006	
City Fairfax	State VA	Zip Code 22031	Amount of Each Disbursement this Period 90.70
Purpose of Disbursement Payroll Taxes		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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>90.70</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>18654.84</b>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
New Democrat Coalition Political Action Committee AKA NDC PAC

Full Name (Last, First, Middle Initial) <b>A. Boswell For Congress</b>		<b>Transaction ID: D159</b> Date of Disbursement 06 / 06 / 2006	
Mailing Address P.O. Box 6220		Amount of Each Disbursement this Period 5000.00	
City Des Moines State IA Zip Code 50309	Purpose of Disbursement Contribution	Category/ Type	
Candidate Name Leonard Boswell			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 03	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Klein for Congress</b>		<b>Transaction ID: D139</b> Date of Disbursement 06 / 27 / 2006	
Mailing Address 21301 Powerline Road Suite 204		Amount of Each Disbursement this Period 3000.00	
City Boca Raton State FL Zip Code 33433	Purpose of Disbursement Contribution	Category/ Type	
Candidate Name Ron Klein			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 22	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Darcy Burner For Congress</b>		<b>Transaction ID: D144</b> Date of Disbursement 06 / 27 / 2006	
Mailing Address P.O. Box 1090		Amount of Each Disbursement this Period 3000.00	
City Carnation State WA Zip Code 98014	Purpose of Disbursement Contribution	Category/ Type	
Candidate Name Darcy Burner			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	11000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE 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)  
New Democrat Coalition Political Action Committee AKA NDC PAC

Full Name (Last, First, Middle Initial) <b>A. Christine Jennings for Congress</b>		<b>Transaction ID: D140</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 6	
Mailing Address 8211 241st Street East		Amount of Each Disbursement this Period 3000.00	
City Myakka City State FL Zip Code 34251	Purpose of Disbursement Contribution		
Candidate Name Christine Jennings		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 13	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Giffords For Congres</b>		<b>Transaction ID: D141</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 6	
Mailing Address P.O. Box 27565		Amount of Each Disbursement this Period 4000.00	
City Tucson State AZ Zip Code 85726	Purpose of Disbursement Contribution		
Candidate Name Gabrielle Giffords		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Phyllis Busansky for Congress</b>		<b>Transaction ID: D143</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 6	
Mailing Address 3611 Schefflera Road		Amount of Each Disbursement this Period 3000.00	
City Tampa State FL Zip Code 33618	Purpose of Disbursement Contribution		
Candidate Name Phyllis Busansky		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 09	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	10000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]



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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
New Democrat Coalition Political Action Committee AKA NDC PAC

Full Name (Last, First, Middle Initial) <b>A. Tim Mahoney for Florida</b>		<b>Transaction ID: D138</b> Date of Disbursement 06 / 27 / 2006
Mailing Address 1128-408 Royal Plam Beach Blvd.		Amount of Each Disbursement this Period 3000.00
City Royal Palm Beach	State FL	
Zip Code 33411		
Purpose of Disbursement Contribution Candidate Name Tim Mahoney Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 16		
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/Type

Full Name (Last, First, Middle Initial) <b>B. Cranley For Congress</b>		<b>Transaction ID: D142</b> Date of Disbursement 06 / 27 / 2006
Mailing Address 37 West 7th Street Suite 804		Amount of Each Disbursement this Period 5000.00
City Cincinnati	State OH	
Zip Code 45202		
Purpose of Disbursement Contribution Candidate Name John J. Cranley, IV Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/Type

Full Name (Last, First, Middle Initial) <b>C. Arcuri For Congress</b>		<b>Transaction ID: D152</b> Date of Disbursement 06 / 29 / 2006
Mailing Address 2617 Crestway		Amount of Each Disbursement this Period 2500.00
City Utica	State NY	
Zip Code 13501		
Purpose of Disbursement Contribution Candidate Name Michael Arcuri Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24		
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	10500.00
<b>TOTAL</b> This Period (last page this line number only) .....	.....

**SCHEDULE 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)  
New Democrat Coalition Political Action Committee AKA NDC PAC

Full Name (Last, First, Middle Initial) <b>A. Spratt For Congress</b>		<b>Transaction ID: D135</b> Date of Disbursement 06 / 13 / 2006	
Mailing Address P.O. Box 830		Amount of Each Disbursement this Period 5000.00	
City York State SC Zip Code 29745	Purpose of Disbursement Contribution	Category/ Type	
Candidate Name John Spratt			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 05	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Friends Of John Barrow</b>		<b>Transaction ID: D145</b> Date of Disbursement 06 / 27 / 2006	
Mailing Address P.O. Box 8166		Amount of Each Disbursement this Period 5000.00	
City Savannah State GA Zip Code 31412	Purpose of Disbursement Contribution	Category/ Type	
Candidate Name John Barrow			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 12	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Carney For Congress</b>		<b>Transaction ID: D151</b> Date of Disbursement 06 / 29 / 2006	
Mailing Address P.O. Box 38		Amount of Each Disbursement this Period 2500.00	
City Dimock State PA Zip Code 18816	Purpose of Disbursement Contribution	Category/ Type	
Candidate Name Chris Carney			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 10	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	12500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	44000.00

# 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 19 / 19

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

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NAME OF COMMITTEE (In Full)

New Democrat Coalition Political Action Committee AKA NDC PAC

Full Name (Last, First, Middle Initial)

**A.** Adam Smith for Congress Committee

Mailing Address P.O. Box 23626

City Federal Way State WA Zip Code 98093

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D137

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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