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## FEC FORM 3X

Only

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines Reed Elsevier Inc. Political Action Committee 1150 18th St., NW, Ste. 600 ADDRESS (number and street) Check if different than previously DC 20036 Washington reported. (ACC) FEC IDENTIFICATION NUMBER STATE. CITY A ZIPCODE A IS THIS **AMENDED** NEW C00345793 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Χ Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 09 0 1 2006 09 30 2006 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Edward R. Comstock Type or Print Name of Treasurer Electronically Filed by Edward R. Comstock 10 10 2006 Signature of Treasurer Date 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 **FEC FORM 3X** Use (Rev. 02/2003)

FEC Form 3X (Rev. 02/2003)

## **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name Reed Elsevier Inc. Political Action Committee <sup>®</sup> D <sup>b</sup> D 0 9 0 1 2006 0.9 3 0 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand <sup>°</sup>2006 7167.94 January 1 (b) Cash on Hand at 4016.95 Begining of Reporting Period ..... 4601.49 28950.50 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 8618.44 36118.44 6(a) and 6(c) for Column B) ..... 3000.00 30500.00 7. Total Disbursements (from Line 31) ...... Cash on Hand at Close of Reporting Period 5618.44 5618.44 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D) ..... 0.00 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 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

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Write or Type Committee Name

Reed Elsevier Inc. Political Action Committee

(subtract Line 18(c) from Line 19) .....

0 1 3<sup>D</sup>0 M N м м 0 9 2006 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 4292.23 18086.77 (i) Itemized (use Schedule A) .......... 309.26 10863.73 (ii) Unitemized ..... (iii) TOTAL (add 4601.49 28950.50 Lines 11(a)(i) and (ii) ...... 0.00 0.00 (b) Political Party Committees ..... Other Political Committees 0.00 0.00 (such as PACs) ..... Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 4601.49 28950.50 Totals to Line 33, page 5) ...... 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees ..... 0.00 0.00 13. All Loans Received ..... 0.00 0.00 14. Loan Repayments Received ..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) ..... 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees ..... 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) ..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (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)). 19. Total Receipts (add Lines 11(d), 4601.49 28950.50 12, 13, 14, 15, 16, 17, and 18(c)) ..... 20. Total Federal Receipts

4601.49

28950.50

## **DETAILED SUMMARY PAGE**

of Disbursements

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| II. DISBURSEMENTS                                                             | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|-------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  (a) Shared Federal/Non-Federal                   |                               |                                   |
| Activity (from Schedule H4)                                                   | 0.00                          | 0.00                              |
| (i) Federal Share                                                             | 0.00                          | 0.00                              |
| (ii) Non-Federal Share                                                        | 0.00                          | 0.00                              |
| (b) Other Federal Operating                                                   | 0.00                          | 0.00                              |
| Expenditures(c) Total Operating Expenditures                                  | 0.00                          | 0.00                              |
| (add 21(a)(i), (a)(ii) and (b))                                               | 0.00                          | 0.00                              |
| 22. Transfers to Affiliated/Other Party  Committees                           | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees                            | 3000.00                       | 29500.00                          |
| and Other Political Committees24. Independent Expenditure                     | 3000.00                       | 29300.00                          |
| (use Schedule E)25. Coordinated Expenditures Made by Party                    | 0.00                          | 0.00                              |
| Committees (2 U.S.C. 441a(d))<br>(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                | 0.00                          | 0.00                              |
| ` 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                          | 1000.00                           |
| 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))                                      | 3000.00                       | 30500.00                          |
| 32. Total Federal Disbursements                                               |                               |                                   |
| (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)                    | 3000.00                       | 30500.00                          |
| ITOITI LIITE OT /                                                             | 3000.00                       | 30300.00                          |

## **DETAILED SUMMARY PAGE**

of Disbursements

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Page 5

| III. Net Contributions/Operating<br>Expenditures                           | COLUMN A Total This Period | COLUMN B<br>Calendar Year-to-Date |
|----------------------------------------------------------------------------|----------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) from Line 11(d), page 3)        | 4601.49                    | 28950.50                          |
| 34. Total Contribution Refunds (from Line 28(d))                           | 0.00                       | 0.00                              |
| Net Contributions (other than loans)     (subtract Line 34 from Line 33)   | 4601.49                    | 28950.50                          |
| 6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 0.00                       | 0.00                              |
| 7. Offsets to Operating Expenditures (from Line 15, page 3)                | 0.00                       | 0.00                              |
| 88. Net Operating Expenditures (subtract Line 37 from Line 36)             | 0.00                       | 0.00                              |

| S                                                                                            | CHEDULE A (FEC Form 3X)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                       | Use separate schedule(s)                                                 | FOR LINE NUMBER: PAGE 6 / 21                                                              |  |  |  |
|----------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|--------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|--|--|--|
|                                                                                              | ITEMIZED RECEIPTS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                       | or each category of the                                                  | (check only one)                                                                          |  |  |  |
| •••                                                                                          | LIMIZED RECEIP 13                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                       | Detailed Summary Page                                                    | X 11a 11b 11c 12                                                                          |  |  |  |
|                                                                                              | information and formation Boundary and Obstant                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                       |                                                                          | 13 14 15 16 17                                                                            |  |  |  |
| or                                                                                           | ny information copied from such Reports and Statem<br>for commercial purposes, other than using the name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | ents may<br>e and add | rnot be sold or used by any perso<br>dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |  |  |  |
|                                                                                              | NAME OF COMMITTEE (In Full)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                       |                                                                          |                                                                                           |  |  |  |
| $ \rangle$                                                                                   | Reed Elsevier Inc. Political Action Committ                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ee                    |                                                                          |                                                                                           |  |  |  |
| $\angle$                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                                                                          |                                                                                           |  |  |  |
|                                                                                              | Full Name (Last, First, Middle Initial)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                       |                                                                          | Data of Bassist                                                                           |  |  |  |
| Α.                                                                                           | William F. Bayers                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                       |                                                                          | Date of Receipt                                                                           |  |  |  |
|                                                                                              | Mailing Address 28 Lincoln Street                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                       |                                                                          | 09 15 2006                                                                                |  |  |  |
|                                                                                              | City                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | State                 | Zip Code                                                                 | Transaction ID: 61010.C6912                                                               |  |  |  |
|                                                                                              | Belmont                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | MA                    | 02478                                                                    | Amount of Each Receipt this Period                                                        |  |  |  |
|                                                                                              | FEC ID number of contributing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 2                     | 1 1 1 1 1                                                                | 100.00                                                                                    |  |  |  |
|                                                                                              | federal political committee.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                       |                                                                          | 100.00                                                                                    |  |  |  |
|                                                                                              | Name of Employer Oo                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ccupation             | า                                                                        | Receipt                                                                                   |  |  |  |
|                                                                                              | Haroourt Education                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                       | sident and General Cou                                                   |                                                                                           |  |  |  |
|                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       | Year-to-Date ▼                                                           |                                                                                           |  |  |  |
|                                                                                              | Primary General                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       | 000.00                                                                   | Payroll Deduction: (50.00-                                                                |  |  |  |
|                                                                                              | Other (specify) ▼                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                       | 900.00                                                                   | /Pay Period )                                                                             |  |  |  |
|                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                                                                          |                                                                                           |  |  |  |
| R                                                                                            | Full Name (Last, First, Middle Initial) Richard F. Blake                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                       |                                                                          | Date of Receipt                                                                           |  |  |  |
| ٥.                                                                                           | Mailing Address 67 Brier Street                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                                                                          | M M / D D / Y Y Y Y                                                                       |  |  |  |
|                                                                                              | The state of the s |                       |                                                                          | 09 15 2006                                                                                |  |  |  |
|                                                                                              | City                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | State                 | Zip Code                                                                 | Transaction ID: 61010.C6915                                                               |  |  |  |
|                                                                                              | Winnetka                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <u>IL</u>             | 60093                                                                    | Amount of Each Receipt this Period                                                        |  |  |  |
|                                                                                              | FEC ID number of contributing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                       |                                                                          | 30.00                                                                                     |  |  |  |
|                                                                                              | federal political committee.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | J                     |                                                                          |                                                                                           |  |  |  |
|                                                                                              | Name of Employer<br>Harcourt Education                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ccupation             | 1                                                                        | Receipt                                                                                   |  |  |  |
|                                                                                              | Harcourt Education V                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | P Comr                | m & Government Relations                                                 |                                                                                           |  |  |  |
|                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ggregate              | Year-to-Date ▼                                                           |                                                                                           |  |  |  |
|                                                                                              | Primary General                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       | 270.00                                                                   | Payroll Deduction: (15.00-/Pay Period)                                                    |  |  |  |
|                                                                                              | Other (specify) ▼                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 1 1                   |                                                                          | /ray renou )                                                                              |  |  |  |
| _                                                                                            | Full Name (Last, First, Middle Initial)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                       |                                                                          |                                                                                           |  |  |  |
| C.                                                                                           | Chet Burchett                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                       |                                                                          | Date of Receipt                                                                           |  |  |  |
|                                                                                              | Mailing Address 37 Cheesespring Road                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                       |                                                                          | M M / D D / Y Y Y Y                                                                       |  |  |  |
|                                                                                              | City                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Ctata                 | 7in Codo                                                                 | 09 15 2006                                                                                |  |  |  |
|                                                                                              | •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | State<br>CT           | Zip Code<br>06897                                                        | Transaction ID: 61010.C6895                                                               |  |  |  |
|                                                                                              | FFO ID words and contribution                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                       | 00031                                                                    | Amount of Each Receipt this Period                                                        |  |  |  |
|                                                                                              | FEC ID number of contributing federal political committee.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                       |                                                                          | 100.00                                                                                    |  |  |  |
|                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                                                                          | Receipt                                                                                   |  |  |  |
| Name of Employer Reed Exhibitions  Preside  Receipt For:  Primary  General  Occupati Preside |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                                                                          | 1.000.6                                                                                   |  |  |  |
|                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       | e Year-to-Date ▼                                                         | $\dashv$                                                                                  |  |  |  |
|                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       | , isai to bate ¥                                                         | Payroll Deduction: (50.00-                                                                |  |  |  |
|                                                                                              | Other (specify) ▼                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                       | 700.00                                                                   | /Pay Period )                                                                             |  |  |  |
| _                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                                                                          |                                                                                           |  |  |  |
|                                                                                              | 200.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                       |                                                                          |                                                                                           |  |  |  |
| S                                                                                            | UBTOTAL of Receipts This Page (optional)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                       | <b>&gt;</b>                                                              | 230.00                                                                                    |  |  |  |
|                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                                                                          |                                                                                           |  |  |  |
| T                                                                                            | <b>OTAL</b> This Period (last page this line number only)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                       | <b>&gt;</b>                                                              |                                                                                           |  |  |  |

| SCHEDULE A (FEC Form 3X)              |                                                            |                         | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 7/21                   |
|---------------------------------------|------------------------------------------------------------|-------------------------|-------------------------------------|----------------------------------------------|
| ITEMIZED RECEIPTS                     |                                                            |                         | or each category of the             | (check only one)                             |
| •••                                   |                                                            |                         | Detailed Summary Page               | X   11a   11b   11c   12   15   16   17      |
| Δr                                    | y information copied from such Reports and St              | atements may            | y not be sold or used by any ners   |                                              |
| or                                    | for commercial purposes, other than using the              | name and ado            | dress of any political committee to | o solicit contributions from such committee. |
| $\setminus$                           | NAME OF COMMITTEE (In Full)                                |                         |                                     |                                              |
|                                       | Reed Elsevier Inc. Political Action Com                    |                         |                                     |                                              |
| A.                                    | Full Name (Last, First, Middle Initial) James A. Casella   |                         |                                     | Date of Receipt                              |
|                                       | Mailing Address 3340 Deer Hollow Drive                     | 9                       |                                     | 09 15 2006                                   |
|                                       | City                                                       | State                   | Zip Code                            | Transaction ID: 61010.C6887                  |
|                                       | <u>Danville</u>                                            | CA                      | 94506                               | Amount of Each Receipt this Period           |
|                                       | FEC ID number of contributing federal political committee. | C                       |                                     | 83.34                                        |
|                                       | Name of Employer<br>Reed Business Information              | Occupation CEO          | ٦                                   | Receipt                                      |
|                                       | Receipt For:                                               |                         | e Year-to-Date ▼                    |                                              |
|                                       | Primary General                                            | 7.1991.094.0            |                                     | Payroll Deduction: (41.67-                   |
|                                       | Other (specify) ▼                                          | 0 0                     | 750.06                              | /Pay Period )                                |
| В.                                    | Full Name (Last, First, Middle Initial) Rex Caswell        |                         |                                     | Date of Receipt                              |
|                                       | Mailing Address 10233 Park Edge Drive                      | 09 15 2006              |                                     |                                              |
|                                       | City State                                                 |                         | Zip Code                            | Transaction ID: 61010.C6871                  |
|                                       | Centerville                                                | OH                      | 45458                               | Amount of Each Receipt this Period           |
|                                       | FEC ID number of contributing federal political committee. | C                       |                                     | 34.32                                        |
|                                       | Name of Employer<br>LexisNexis                             | Occupation VP Sales     |                                     | Receipt                                      |
|                                       | Receipt For:                                               |                         | e Year-to-Date ▼                    |                                              |
|                                       | Primary General Other (specify) ▼                          | 0 0                     | 308.88                              | Payroll Deduction: (17.16-<br>/Pay Period )  |
| <u> </u>                              | Full Name (Last, First, Middle Initial) William M. Conway  |                         |                                     | Date of Receipt                              |
|                                       | Mailing Address 44 Alba Road                               |                         |                                     | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
|                                       | City                                                       | State                   | Zip Code                            | Transaction ID: 61010.C6918                  |
|                                       | Wellesley                                                  | MA                      | 02481                               | Amount of Each Receipt this Period           |
|                                       | FEC ID number of contributing federal political committee. |                         |                                     | 30.00                                        |
| Name of Employer<br>Reed Elsevier Inc |                                                            | Occupation<br>VP Real I |                                     | Receipt                                      |
|                                       | Receipt For:                                               |                         | Year-to-Date ▼                      |                                              |
|                                       | Primary General Other (specify) ▼                          | 0 0                     | 270.00                              | Payroll Deduction: (15.00-/Pay Period )      |
| s                                     | UBTOTAL of Receipts This Page (optional)                   |                         |                                     | 147.66                                       |
| <br>  T                               | OTAL This Period (last page this line number of            | only)                   |                                     |                                              |

## SCHEDULE A (FEC Form 3X)

| SCHEDULE A (FEC Form 3X) |                                                                                    |                         | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 8/21                     |
|--------------------------|------------------------------------------------------------------------------------|-------------------------|-------------------------------------|------------------------------------------------|
| ITEMIZED RECEIPTS        |                                                                                    |                         | or each category of the             | (check only one)                               |
| ••                       |                                                                                    |                         | Detailed Summary Page               | X   11a   11b   11c   12   15   16   17        |
| An                       | y information copied from such Reports and St                                      | atements may            | not be sold or used by any person   | on for the purpose of soliciting contributions |
| or                       | for commercial purposes, other than using the                                      | name and add            | dress of any political committee to | solicit contributions from such committee.     |
| $\setminus$              | NAME OF COMMITTEE (In Full)                                                        |                         |                                     |                                                |
|                          | Reed Elsevier Inc. Political Action Com                                            | nmittee                 |                                     |                                                |
| Α.                       | Full Name (Last, First, Middle Initial)<br>Mark S. Dalton                          |                         |                                     | Date of Receipt                                |
|                          | Mailing Address 5 King Edward Drive                                                |                         |                                     | 09 15 2006                                     |
|                          | City                                                                               | State                   | Zip Code                            | Transaction ID: 61010.C6888                    |
|                          | Londonderry NH  FEC ID number of contributing federal political committee.  C      |                         | 03053                               | Amount of Each Receipt this Period             |
|                          |                                                                                    |                         |                                     | 29.06                                          |
|                          | Name of Employer<br>Elsevier                                                       | Occupation<br>Vice Pres | n<br>sident Business Develo         | Receipt                                        |
|                          | Receipt For:                                                                       |                         | Year-to-Date ▼                      |                                                |
|                          | Primary General                                                                    | 33 -3                   |                                     | Payroll Deduction: (14.53-                     |
|                          | Other (specify) ▼                                                                  | 0 0                     | 261.54                              | /Pay Period )                                  |
| В.                       | Full Name (Last, First, Middle Initial) Joseph J. Douress                          |                         |                                     | Date of Receipt                                |
|                          | Mailing Address 1010 Cornwallis Dr                                                 |                         |                                     | 09 15 YYYYY<br>2006                            |
|                          | City                                                                               | State                   | Zip Code                            | Transaction ID: 61010.C6897                    |
|                          | Easton                                                                             | PA 18040                |                                     | Amount of Each Receipt this Period             |
|                          | FEC ID number of contributing federal political committee.                         | C                       |                                     | 37.38                                          |
|                          | Name of Employer<br>Reed Elsevier New Provide-<br>nce                              | Occupation VP & GM      | n<br>I Client Development Bus       | Receipt                                        |
|                          | Receipt For:                                                                       | Aggregate               | Year-to-Date ▼                      |                                                |
|                          | Primary General Other (specify) ▼                                                  |                         | 336.42                              | Payroll Deduction: (18.69-<br>/Pay Period )    |
| —<br>С.                  | Full Name (Last, First, Middle Initial) Steven Emmert                              |                         |                                     | Date of Receipt                                |
|                          | Mailing Address 13890 Lewis Mill Way                                               |                         |                                     | M M / D D / Y Y Y Y                            |
|                          | City                                                                               | State                   | Zip Code                            | 0 9 1 5 2 0 0 6 Transaction ID: 61010.C6874    |
|                          | <u>Chantilly</u>                                                                   |                         | 20151                               | Amount of Each Receipt this Period             |
|                          | FEC ID number of contributing                                                      |                         |                                     |                                                |
|                          | federal political committee.  Name of Employer Reed Elsevier Inc  Receipt For:  Ag |                         |                                     | 13.84                                          |
|                          |                                                                                    |                         |                                     | Receipt                                        |
|                          |                                                                                    |                         | rnment Affairs                      |                                                |
|                          |                                                                                    |                         | Year-to-Date ▼                      |                                                |
|                          | Primary General Other (specify) ▼                                                  |                         | 235.28                              | Payroll Deduction: (13.84-<br>/Pay Period )    |
|                          | UBTOTAL of Receipts This Page (optional)                                           |                         |                                     | 80.28                                          |
| -                        | ODI CIAL OI Necelpis IIIIs Page (optioliai)                                        |                         |                                     |                                                |
| Т т                      | OTAL This Period (last page this line number of                                    | only)                   | )                                   |                                                |

| S                                            | CHEDULE A (FEC Form 3X)                                                                         |                              | Use separate schedule(s)                                                  | FOR LINE NUMBER: PAGE 9 / 21                                                              |  |  |  |  |
|----------------------------------------------|-------------------------------------------------------------------------------------------------|------------------------------|---------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|--|--|--|--|
|                                              | ITEMIZED RECEIPTS                                                                               |                              | or each category of the                                                   | (check only one)                                                                          |  |  |  |  |
| •••                                          | LIMIZED RECEIP 13                                                                               |                              | Detailed Summary Page                                                     | X 11a 11b 11c 12                                                                          |  |  |  |  |
| _                                            |                                                                                                 |                              |                                                                           | 13 14 15 16 17                                                                            |  |  |  |  |
| or                                           | ny information copied from such Reports and St<br>for commercial purposes, other than using the | atements may<br>name and add | y not be sold or used by any perso<br>dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |  |  |  |  |
|                                              | NAME OF COMMITTEE (In Full)                                                                     |                              |                                                                           |                                                                                           |  |  |  |  |
| $  \rangle$                                  | Reed Elsevier Inc. Political Action Com                                                         | ımittee                      |                                                                           |                                                                                           |  |  |  |  |
|                                              |                                                                                                 |                              |                                                                           |                                                                                           |  |  |  |  |
|                                              | Full Name (Last, First, Middle Initial)                                                         |                              |                                                                           | Data of Bassist                                                                           |  |  |  |  |
| Α.                                           |                                                                                                 |                              |                                                                           | Date of Receipt                                                                           |  |  |  |  |
|                                              | Mailing Address 13890 Lewis Mill Way                                                            |                              |                                                                           | 09 30 2006                                                                                |  |  |  |  |
|                                              | City                                                                                            | State                        | Zip Code                                                                  | Transaction ID: 61010.C6935                                                               |  |  |  |  |
|                                              | Chantilly                                                                                       | VA                           | 20151                                                                     | Amount of Each Receipt this Period                                                        |  |  |  |  |
|                                              | FEC ID number of contributing                                                                   |                              |                                                                           | 13.83                                                                                     |  |  |  |  |
|                                              | federal political committee.                                                                    | С                            |                                                                           | 13.03                                                                                     |  |  |  |  |
|                                              | Name of Employer                                                                                | Occupatio                    | <u> </u>                                                                  | Receipt                                                                                   |  |  |  |  |
|                                              | Reed Elsevier Inc                                                                               |                              | rnment Affairs                                                            |                                                                                           |  |  |  |  |
|                                              | Receipt For:                                                                                    |                              | e Year-to-Date ▼                                                          |                                                                                           |  |  |  |  |
|                                              | Primary General                                                                                 |                              | 04044                                                                     | Payroll Deduction: (13.83-                                                                |  |  |  |  |
|                                              | Other (specify)                                                                                 | 0 0                          | 249.11                                                                    | /Pay Period )                                                                             |  |  |  |  |
|                                              |                                                                                                 |                              |                                                                           |                                                                                           |  |  |  |  |
| В.                                           | Full Name (Last, First, Middle Initial) Charles P. Fontaine                                     |                              |                                                                           | Date of Receipt                                                                           |  |  |  |  |
| ٠.                                           | Mailing Address 162 Colonial Road                                                               |                              |                                                                           | M M / D D / Y Y Y Y                                                                       |  |  |  |  |
|                                              | Top Colonial Hoad                                                                               |                              |                                                                           | 09 15 2006                                                                                |  |  |  |  |
|                                              | City                                                                                            | State                        | Zip Code                                                                  | Transaction ID: 61010.C6899                                                               |  |  |  |  |
|                                              | Providence                                                                                      | RI                           | 02906                                                                     | Amount of Each Receipt this Period                                                        |  |  |  |  |
|                                              | FEC ID number of contributing                                                                   | С                            |                                                                           | 40.00                                                                                     |  |  |  |  |
|                                              | federal political committee.                                                                    | 0                            |                                                                           |                                                                                           |  |  |  |  |
|                                              | Name of Employer<br>Reed Elsevier Inc                                                           | Occupatio                    | n                                                                         | Receipt                                                                                   |  |  |  |  |
|                                              | Reed Eisevier inc                                                                               | Vice Pres                    | sident Taxation                                                           |                                                                                           |  |  |  |  |
|                                              | Receipt For:                                                                                    | Aggregate                    | e Year-to-Date ▼                                                          |                                                                                           |  |  |  |  |
|                                              | Primary General                                                                                 | ' '                          | 360.00                                                                    | Payroll Deduction: (20.00-<br>/Pay Period )                                               |  |  |  |  |
|                                              | Other (specify)                                                                                 | 0 0                          | 1 1 1 1 1 1 1                                                             | )                                                                                         |  |  |  |  |
| _                                            | Full Name (Last, First, Middle Initial)                                                         |                              |                                                                           |                                                                                           |  |  |  |  |
| C.                                           | David Glowacki                                                                                  |                              |                                                                           | Date of Receipt                                                                           |  |  |  |  |
|                                              | Mailing Address 3130 Muzzete                                                                    |                              |                                                                           | M M / D D / Y Y Y Y                                                                       |  |  |  |  |
|                                              | City                                                                                            | State                        | Zip Code                                                                  | 09 15 2006                                                                                |  |  |  |  |
|                                              | Bellbrook                                                                                       | OH                           | 45305                                                                     | Transaction ID: 61010.C6869  Amount of Each Receipt this Period                           |  |  |  |  |
|                                              | FFO ID work or of contribution                                                                  |                              | 70000                                                                     | Amount of Lacin necelpt this Feriod                                                       |  |  |  |  |
|                                              | FEC ID number of contributing federal political committee.                                      | C                            |                                                                           | 35.62                                                                                     |  |  |  |  |
| Name of Employer Occupati LexisNexis VP Proc |                                                                                                 |                              |                                                                           | Receipt                                                                                   |  |  |  |  |
|                                              |                                                                                                 |                              |                                                                           | · '                                                                                       |  |  |  |  |
|                                              |                                                                                                 |                              | e Year-to-Date 🔻                                                          | -                                                                                         |  |  |  |  |
|                                              | Primary General                                                                                 | 7.99.094.0                   |                                                                           | Payroll Deduction: (17.81-                                                                |  |  |  |  |
|                                              | Other (specify) ▼                                                                               |                              | 320.58                                                                    | /Pay Period )                                                                             |  |  |  |  |
| _                                            |                                                                                                 |                              |                                                                           |                                                                                           |  |  |  |  |
|                                              |                                                                                                 |                              |                                                                           |                                                                                           |  |  |  |  |
| S                                            | SUBTOTAL of Receipts This Page (optional)                                                       |                              |                                                                           |                                                                                           |  |  |  |  |
|                                              |                                                                                                 |                              |                                                                           |                                                                                           |  |  |  |  |
| ΙT                                           | <b>OTAL</b> This Period (last page this line number of                                          | oniy)                        |                                                                           |                                                                                           |  |  |  |  |

| SCHEDULE A (FEC Form 3X) |                                                                |                          | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 10 / 21               |
|--------------------------|----------------------------------------------------------------|--------------------------|-------------------------------------|---------------------------------------------|
|                          | EMIZED RECEIPTS                                                |                          | or each category of the             | (check only one)                            |
| ••                       | EMIZED RECEIL 10                                               |                          | Detailed Summary Page               | X   11a   11b   11c   12   15   16   17     |
| Δ                        | y information copied from such Reports and Sta                 | atomonte mou             | reat he sold or used by any person  |                                             |
| or                       | for commercial purposes, other than using the r                | name and add             | dress of any political committee to | osolicit contributions from such committee. |
| $\setminus$              | NAME OF COMMITTEE (In Full)                                    |                          |                                     |                                             |
|                          | Reed Elsevier Inc. Political Action Com                        | mittee                   |                                     |                                             |
| A.                       |                                                                |                          |                                     | Date of Receipt                             |
|                          | Mailing Address 9620 Preserve Place                            |                          |                                     | 09 15 2006                                  |
|                          | City                                                           | State                    | Zip Code                            | Transaction ID: 61010.C6865                 |
|                          | Centerville                                                    | OH                       | 45458                               | Amount of Each Receipt this Period          |
|                          | FEC ID number of contributing federal political committee.     | C                        |                                     | 25.00                                       |
|                          | Name of Employer<br>LexisNexis                                 | Occupation<br>Director ( | n<br>Global Procurement             | - Receipt                                   |
|                          | Receipt For:                                                   |                          | e Year-to-Date ▼                    |                                             |
|                          | Primary General                                                |                          | 00F 00                              | Payroll Deduction: (12.50-                  |
|                          | Other (specify) ▼                                              |                          | 225.00                              | Páy Period )՝                               |
| В.                       | Full Name (Last, First, Middle Initial) Margaret M. Hutchinson |                          |                                     | Date of Receipt                             |
|                          | Mailing Address 6721 Kenhill Road                              |                          |                                     | 09 15 2006                                  |
|                          | City                                                           | State                    | Zip Code                            | Transaction ID: 61010.C6864                 |
|                          | Bethesda                                                       | MD                       | 20817                               | Amount of Each Receipt this Period          |
|                          | FEC ID number of contributing federal political committee.     | C                        |                                     | 30.00                                       |
|                          | Name of Employer<br>LexisNexis                                 | Occupation<br>VP Opera   |                                     | - Receipt                                   |
|                          | Receipt For:                                                   | Aggregate                | e Year-to-Date ▼                    |                                             |
|                          | Primary General Other (specify) ▼                              |                          | 270.00                              | Payroll Deduction: (15.00-/Pay Period )     |
| _                        | Full Name (Last, First, Middle Initial)                        |                          |                                     | 2. (2. (                                    |
| C.                       | David G. Israel  Mailing Address 6 Sandown Boad                |                          |                                     | Date of Receipt                             |
|                          | Mailing Address 6 Sandown Road<br>Great Britain                |                          |                                     | 09 15 2006                                  |
|                          | City                                                           | State                    | Zip Code                            | Transaction ID: 61010.C6908                 |
|                          | Esher Surrey                                                   | ZZ                       | 00000                               | Amount of Each Receipt this Period          |
|                          | FEC ID number of contributing federal political committee.     | C                        |                                     | 101.52                                      |
|                          | Name of Employer<br>Reed Business Information                  | Occupation<br>CEO RBI    | n<br>I International                | Receipt                                     |
|                          | Receipt For:                                                   |                          | e Year-to-Date ▼                    |                                             |
|                          | Primary General Other (specify) ▼                              | 0 0                      | 913.68                              | Payroll Deduction: (50.76-/Pay Period )     |
| s                        | LUBTOTAL of Receipts This Page (optional)                      |                          |                                     | 156.52                                      |
| $\vdash$                 | OTAL This Period (last page this line number of                |                          |                                     |                                             |

| SCHEDULE A (FEC Form 3X) |                                                                                                   |                                                  | 11                                  | FOR LINE NUMBER: PAGE 11 / 21                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|--------------------------|---------------------------------------------------------------------------------------------------|--------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                          | •                                                                                                 | Use separate schedule(s) or each category of the |                                     | (check only one)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| 11                       | EMIZED RECEIPTS                                                                                   |                                                  | Detailed Summary Page               | X 11a 11b 11c 12                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                          |                                                                                                   |                                                  | , -                                 | 13 14 15 16 17                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| Ar                       | y information copied from such Reports and Sta<br>for commercial purposes, other than using the r | tements may                                      | not be sold or used by any perso    | on for the purpose of soliciting contributions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <u>~</u>                 | NAME OF COMMITTEE (In Full)                                                                       | arro arro acc                                    | arood or arry pointion committee to | Control Contro |
| $ \rangle$               | Reed Elsevier Inc. Political Action Com                                                           | mittee                                           |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                          |                                                                                                   |                                                  |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Α.                       | Full Name (Last, First, Middle Initial)                                                           |                                                  |                                     | Date of Receipt                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| A.                       | Richard Jacobs  Mailing Address 616 Murrell Drive                                                 |                                                  |                                     | M M / D D / Y Y Y Y                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|                          | Walling Address 616 Multell Drive                                                                 |                                                  |                                     | 09 15 2006                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|                          | City                                                                                              | State                                            | Zip Code                            | Transaction ID: 61010.C6866                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|                          | Dayton                                                                                            | OH                                               | 45429                               | Amount of Each Receipt this Period                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|                          | FEC ID number of contributing                                                                     |                                                  |                                     | 30.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                          | federal political committee.                                                                      | C                                                |                                     | 30.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                          | Name of Employer<br>LexisNexis                                                                    | Occupation                                       | <br>1                               | Receipt                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                          | LexisNexis                                                                                        |                                                  | & Deputy General Counse             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                          | Receipt For:                                                                                      | Aggregate                                        | Year-to-Date ▼                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                          | Primary General                                                                                   |                                                  | 270.00                              | Payroll Deduction: (15.00-                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|                          | Other (specify)                                                                                   |                                                  | 270.00                              | /Páy Period )`                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                          | Full Name (Last, First, Middle Initial)                                                           |                                                  |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| В.                       | Teresa L. Jennings                                                                                |                                                  |                                     | Date of Receipt                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                          | Mailing Address 116 S. Hudson Street                                                              |                                                  |                                     | M M / D D / Y Y Y Y                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|                          |                                                                                                   |                                                  |                                     | 09 15 2006                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|                          | City                                                                                              | State                                            | Zip Code                            | Transaction ID: 61010.C6916                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|                          | Arlington                                                                                         | VA                                               | 22204                               | Amount of Each Receipt this Period                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|                          | FEC ID number of contributing federal political committee.                                        | C                                                |                                     | 30.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                          |                                                                                                   |                                                  |                                     | Receipt                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                          | Name of Employer<br>Reed Elsevier Inc                                                             | Occupation                                       |                                     | rieceipi                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|                          |                                                                                                   |                                                  | Government Affairs                  | _                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|                          | Receipt For: Primary General                                                                      | Aggregate                                        | Year-to-Date ▼                      | Daywell Dadwetians (15.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                          | Other (specify)                                                                                   |                                                  | 240.00                              | Payroll Deduction: (15.00-<br>/Pay Period )                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|                          |                                                                                                   |                                                  |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| <u>с.</u>                | Full Name (Last, First, Middle Initial) Mark D. Johnson                                           |                                                  |                                     | Data of Descript                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| C.                       | Mailing Address 411 SW 66th                                                                       |                                                  |                                     | Date of Receipt                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                          | 411 3VV 00[[]                                                                                     |                                                  |                                     | 09 15 2006                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|                          | City                                                                                              | State                                            | Zip Code                            | Transaction ID: 61010.C6893                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|                          | Oklahoma City                                                                                     | OK                                               | 73139                               | Amount of Each Receipt this Period                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|                          | FEC ID number of contributing                                                                     | C                                                |                                     | 26.08                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                          | federal political committee.                                                                      |                                                  |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                          | Name of Employer<br>LexisNexis                                                                    | Occupation                                       | า                                   | Receipt                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                          |                                                                                                   | VP Data                                          |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                          | Receipt For:                                                                                      | Aggregate                                        | Year-to-Date ▼                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                          | Primary General                                                                                   |                                                  | 234.72                              | Payroll Deduction: (13.04-/Pay Period)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|                          | Other (specify) ▼                                                                                 |                                                  |                                     | / ay i ellou )                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| Г                        | L                                                                                                 |                                                  |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| s                        | UBTOTAL of Receipts This Page (optional)                                                          |                                                  | <b>_</b>                            | 86.08                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| $\vdash$                 |                                                                                                   |                                                  |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |

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

## SCHEDULE A (FEC Form 3X)

| SCHEDULE A (FEC Form 3X)                                   |                                                            |                                            | Use separate schedule(s)         | FOR LINE NUMBER: PAGE 12 / 21                       |  |  |  |
|------------------------------------------------------------|------------------------------------------------------------|--------------------------------------------|----------------------------------|-----------------------------------------------------|--|--|--|
| ITEMIZED RECEIPTS                                          |                                                            |                                            | or each category of the          | (check only one)                                    |  |  |  |
|                                                            |                                                            |                                            | Detailed Summary Page            | X   11a     11b     11c     12     15     16     17 |  |  |  |
| Ar                                                         | y information copied from such Reports and Sta             | atements may                               | not be sold or used by any perso |                                                     |  |  |  |
| or                                                         | for commercial purposes, other than using the i            | solicit contributions from such committee. |                                  |                                                     |  |  |  |
| $\setminus$                                                | NAME OF COMMITTEE (In Full)                                |                                            |                                  |                                                     |  |  |  |
|                                                            | Reed Elsevier Inc. Political Action Com                    | mittee                                     |                                  |                                                     |  |  |  |
| Α.                                                         | Full Name (Last, First, Middle Initial)<br>Rick W. Kasper  |                                            |                                  | Date of Receipt                                     |  |  |  |
|                                                            | Mailing Address 42W055 Copperwood L                        | ₋n.                                        |                                  | 0 9 1 5 2 0 0 6                                     |  |  |  |
|                                                            | City                                                       | State                                      | Zip Code                         | Transaction ID: 61010.C6917                         |  |  |  |
|                                                            | St. Charles                                                | IL                                         | 60175                            | Amount of Each Receipt this Period                  |  |  |  |
|                                                            | FEC ID number of contributing federal political committee. | C                                          |                                  | 44.32                                               |  |  |  |
|                                                            | Name of Employer<br>Reed Business Information              | Occupation                                 |                                  | Receipt                                             |  |  |  |
|                                                            | Receipt For:                                               | <del></del>                                | ce President<br>• Year-to-Date ▼ | _                                                   |  |  |  |
|                                                            | Primary General                                            | Aggregate                                  |                                  | Payroll Deduction: (22.16-                          |  |  |  |
|                                                            | Other (specify)                                            | 0 0                                        | 398.88                           | /Pay Period )                                       |  |  |  |
| —<br>В.                                                    | Full Name (Last, First, Middle Initial) Edward G. Keigher  |                                            |                                  | Date of Receipt                                     |  |  |  |
|                                                            | Mailing Address 9532 Baycliff Court                        |                                            |                                  | 09 15 2006                                          |  |  |  |
|                                                            | City                                                       | State                                      | Zip Code                         | Transaction ID: 61010.C6900                         |  |  |  |
|                                                            | Orlando                                                    | IL                                         | 60010                            | Amount of Each Receipt this Period                  |  |  |  |
|                                                            | FEC ID number of contributing federal political committee. | C                                          |                                  | 33.64                                               |  |  |  |
|                                                            | Name of Employer<br>Harcourt Education                     | Occupation VP Intern                       | n<br>national Manufacturing      | Receipt                                             |  |  |  |
|                                                            | Receipt For:                                               |                                            | Year-to-Date ▼                   |                                                     |  |  |  |
|                                                            | Primary General                                            |                                            | 302.76                           | Payroll Deduction: (16.82-                          |  |  |  |
|                                                            | Other (specify)                                            | 0 0                                        | 302.70                           | /Páy Period )`                                      |  |  |  |
| C.                                                         | Full Name (Last, First, Middle Initial)<br>David Kim       |                                            |                                  | Date of Receipt                                     |  |  |  |
|                                                            | Mailing Address 300 East 39th Street Ap                    | ot 26G                                     |                                  | 09 15 2006                                          |  |  |  |
|                                                            | City                                                       | State                                      | Zip Code                         | Transaction ID: 61010.C6896                         |  |  |  |
|                                                            | New York                                                   | NY                                         | 10016                            | Amount of Each Receipt this Period                  |  |  |  |
| FEC ID number of contributing federal political committee. |                                                            |                                            |                                  | 64.58                                               |  |  |  |
|                                                            | Name of Employer Harcourt Education Occupati               |                                            | n<br>siness Development & S      | Receipt                                             |  |  |  |
|                                                            |                                                            |                                            | Year-to-Date ▼                   |                                                     |  |  |  |
| Primary General Other (specify) ▼                          |                                                            |                                            | 581.22                           | Payroll Deduction: (32.29-<br>/Pay Period )         |  |  |  |
| ٩                                                          | LUBTOTAL of Receipts This Page (optional)                  |                                            |                                  | 142.54                                              |  |  |  |
| Г                                                          |                                                            |                                            | <u> </u>                         |                                                     |  |  |  |
| T                                                          | TOTAL This Period (last page this line number only)        |                                            |                                  |                                                     |  |  |  |

| SCHEDULE A (FEC Form 3X) |                                                                                    |                         | Use separate schedule(s)                                                  | FOR LINE NUMBER: PAGE 13/21                                                              |  |  |  |  |
|--------------------------|------------------------------------------------------------------------------------|-------------------------|---------------------------------------------------------------------------|------------------------------------------------------------------------------------------|--|--|--|--|
| ITEMIZED RECEIPTS        |                                                                                    |                         | or each category of the                                                   | (check only one)                                                                         |  |  |  |  |
|                          | D RECEIP 13                                                                        |                         | Detailed Summary Page                                                     | X 11a 11b 11c 12                                                                         |  |  |  |  |
| A : f                    | are a seried from such Demants and Otaton                                          |                         |                                                                           | 13 14 15 16 17                                                                           |  |  |  |  |
| or for comme             | on copied from such Reports and Staten<br>rcial purposes, other than using the nam | nents may<br>ie and add | rnot be sold or used by any persol<br>Iress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |  |  |  |  |
|                          | COMMITTEE (In Full)                                                                |                         |                                                                           |                                                                                          |  |  |  |  |
| \                        | sevier Inc. Political Action Commit                                                | tee                     |                                                                           |                                                                                          |  |  |  |  |
|                          |                                                                                    |                         |                                                                           |                                                                                          |  |  |  |  |
| _                        | (Last, First, Middle Initial)                                                      |                         |                                                                           | Data of Danaist                                                                          |  |  |  |  |
| A. Scott V. Ki           |                                                                                    |                         |                                                                           | Date of Receipt                                                                          |  |  |  |  |
| Mailing A                | TOSO THICKEL WAIK                                                                  |                         |                                                                           | 09 15 2006                                                                               |  |  |  |  |
| City                     |                                                                                    | State                   | Zip Code                                                                  | Transaction ID: 61010.C6911                                                              |  |  |  |  |
| <u>Dayton</u>            |                                                                                    | OH                      | 45429                                                                     | Amount of Each Receipt this Period                                                       |  |  |  |  |
| FEC ID no                | umber of contributing                                                              | С                       |                                                                           | 50.00                                                                                    |  |  |  |  |
| federal po               | litical committee.                                                                 | <u> </u>                |                                                                           | 30.00                                                                                    |  |  |  |  |
| Name of E<br>LexisNexi   | Employer                                                                           | Occupation              | 1                                                                         | Receipt                                                                                  |  |  |  |  |
| LexisNexi                | s ' ´                                                                              |                         | Deputy General Counse                                                     |                                                                                          |  |  |  |  |
| Receipt F                | or:                                                                                | Aggregate               | Year-to-Date ▼                                                            |                                                                                          |  |  |  |  |
| Prin                     | .,                                                                                 |                         | 450.00                                                                    | Payroll Deduction: (25.00-                                                               |  |  |  |  |
| Oth                      | er (specify) 🔻                                                                     |                         | +30.00                                                                    | /Páy Period )`                                                                           |  |  |  |  |
| Full Name                | Last, First, Middle Initial)                                                       |                         |                                                                           |                                                                                          |  |  |  |  |
| <b>B.</b> Salina Le I    | ,                                                                                  |                         |                                                                           | Date of Receipt                                                                          |  |  |  |  |
| Mailing Ad               | ddress 24 Saxon Wood Park Drive                                                    | Э                       |                                                                           | M M / D D / Y Y Y Y                                                                      |  |  |  |  |
|                          |                                                                                    |                         |                                                                           | 09 15 2006                                                                               |  |  |  |  |
| City                     |                                                                                    | State                   | Zip Code                                                                  | Transaction ID: 61010.C6906                                                              |  |  |  |  |
| White P                  | ains                                                                               | NY                      | 10605                                                                     | Amount of Each Receipt this Period                                                       |  |  |  |  |
| FEC ID no                | umber of contributing<br>litical committee.                                        | C                       |                                                                           | 26.48                                                                                    |  |  |  |  |
|                          | intical committee.                                                                 |                         |                                                                           | Receipt                                                                                  |  |  |  |  |
| Name of E                | inocc Information                                                                  | Occupation              |                                                                           | neceipi                                                                                  |  |  |  |  |
|                          |                                                                                    |                         | Comm & PR                                                                 |                                                                                          |  |  |  |  |
| Receipt F                |                                                                                    | Aggregate               | Year-to-Date ▼                                                            | B #B ! !! (49.94                                                                         |  |  |  |  |
|                          | er (specify)                                                                       |                         | 238.32                                                                    | Payroll Deduction: (13.24-<br>/Pay Period )                                              |  |  |  |  |
|                          | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\                                             |                         |                                                                           | ,                                                                                        |  |  |  |  |
|                          | (Last, First, Middle Initial)                                                      |                         |                                                                           |                                                                                          |  |  |  |  |
| C. Steven M.             |                                                                                    |                         |                                                                           | Date of Receipt                                                                          |  |  |  |  |
| Mailing Ad               | ddress 6041 Redwood Lane                                                           |                         |                                                                           | 09 11 2006                                                                               |  |  |  |  |
| City                     |                                                                                    | State                   | Zip Code                                                                  | Transaction ID: 61010.C6981                                                              |  |  |  |  |
| Alexand                  | ria                                                                                | VA                      | 22310                                                                     | Amount of Each Receipt this Period                                                       |  |  |  |  |
| FEC ID no                | umber of contributing                                                              | 0 '                     |                                                                           | 2000.00                                                                                  |  |  |  |  |
|                          | litical committee.                                                                 | C                       |                                                                           | 2000.00                                                                                  |  |  |  |  |
| Name of F                | -mployer C                                                                         | Occupation              | 1                                                                         | Receipt                                                                                  |  |  |  |  |
| Reed Elsevier Inc        |                                                                                    |                         | sident Government Affa                                                    |                                                                                          |  |  |  |  |
| Receipt F                | or:                                                                                | Aggregate               | Year-to-Date ▼                                                            |                                                                                          |  |  |  |  |
| Prin                     | ,                                                                                  | 1 1                     | 2000.00                                                                   |                                                                                          |  |  |  |  |
| Oth                      | er (specify) 🔻                                                                     |                         | 2000.00                                                                   |                                                                                          |  |  |  |  |
|                          |                                                                                    |                         |                                                                           |                                                                                          |  |  |  |  |
| SUBTOTAL                 | SUBTOTAL of Receipts This Page (optional)                                          |                         |                                                                           |                                                                                          |  |  |  |  |
| JUBIUIAL                 | P                                                                                  |                         |                                                                           |                                                                                          |  |  |  |  |
| TOTAL This               | TOTAL This Period (last page this line number only)                                |                         |                                                                           |                                                                                          |  |  |  |  |

| S                                       | CHEDULE A (FEC Form 3X)                                    |              | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 14/21                 |  |  |  |
|-----------------------------------------|------------------------------------------------------------|--------------|-------------------------------------|---------------------------------------------|--|--|--|
| ITEMIZED RECEIPTS                       |                                                            |              | or each category of the             | (check only one)                            |  |  |  |
| •••                                     | LIMIZED RECEIP 13                                          |              | Detailed Summary Page               | X 11a 11b 11c 12                            |  |  |  |
| Δr                                      | ny information copied from such Reports and St.            | atomonte mai | , not be sold or used by any person | 13 14 15 16 17                              |  |  |  |
| or                                      | for commercial purposes, other than using the              | name and add | dress of any political committee to | solicit contributions from such committee.  |  |  |  |
|                                         | NAME OF COMMITTEE (In Full)                                |              |                                     |                                             |  |  |  |
| $ \rangle$                              | Reed Elsevier Inc. Political Action Com                    | mittee       |                                     |                                             |  |  |  |
| _                                       | Full Name (Last, First, Middle Initial)                    |              |                                     |                                             |  |  |  |
| Α.                                      | Richard D. Mauldin                                         |              |                                     | Date of Receipt                             |  |  |  |
|                                         | Mailing Address 12121 Rohan Rd                             |              |                                     | 09 15 2006                                  |  |  |  |
|                                         | City                                                       | State        | Zip Code                            | Transaction ID: 61010.C6903                 |  |  |  |
|                                         | Oklahoma City                                              | OK           | 73170                               | Amount of Each Receipt this Period          |  |  |  |
|                                         | FEC ID number of contributing federal political committee. | С            |                                     | 30.00                                       |  |  |  |
|                                         | Name of Employer                                           | Occupation   | n                                   | Receipt                                     |  |  |  |
|                                         | LexisNexis                                                 |              | et Planning                         |                                             |  |  |  |
|                                         | Receipt For:                                               |              | e Year-to-Date ▼                    |                                             |  |  |  |
|                                         | Primary General                                            |              | 270.00                              | Payroll Deduction: (15.00-                  |  |  |  |
|                                         | Other (specify)                                            |              | 270.00                              | /Pay Period )                               |  |  |  |
| —<br>В.                                 | Full Name (Last, First, Middle Initial) Julia A. McGee     |              |                                     | Date of Receipt                             |  |  |  |
|                                         | Mailing Address 401 E. 60th Street Apt                     | 29C          |                                     | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |  |  |  |
|                                         | City                                                       | City State   |                                     | Transaction ID: 61010.C6894                 |  |  |  |
|                                         | New York                                                   | NY           | 10022                               | Amount of Each Receipt this Period          |  |  |  |
|                                         | FEC ID number of contributing federal political committee. | C            |                                     | 102.08                                      |  |  |  |
|                                         | Name of Employer<br>Harcourt Education                     | Occupation   | n                                   | Receipt                                     |  |  |  |
|                                         |                                                            |              | t & CEO SP&T                        |                                             |  |  |  |
|                                         | Receipt For:                                               | Aggregate    | e Year-to-Date ▼                    |                                             |  |  |  |
|                                         | Primary General Other (specify) ▼                          |              | 918.72                              | Payroll Deduction: (51.04-<br>/Pay Period ) |  |  |  |
| _                                       | Full Name (Last, First, Middle Initial)                    |              |                                     |                                             |  |  |  |
| C.                                      | Allan McLaughlin                                           |              |                                     | Date of Receipt                             |  |  |  |
|                                         | Mailing Address 7562 Country Brook Ct                      |              |                                     | 09 15 2006                                  |  |  |  |
|                                         | City                                                       | State        | Zip Code                            | Transaction ID: 61010.C6872                 |  |  |  |
|                                         | Springboro                                                 | ОН           | 45066                               | Amount of Each Receipt this Period          |  |  |  |
|                                         | FEC ID number of contributing                              |              |                                     | 50.00                                       |  |  |  |
|                                         | federal political committee.                               | C            |                                     | 30.00                                       |  |  |  |
| Receipt For:  Primary  General  Aggrega |                                                            |              | n                                   | Receipt                                     |  |  |  |
|                                         |                                                            |              | Chief Tech Officer                  |                                             |  |  |  |
|                                         |                                                            |              | e Year-to-Date ▼                    |                                             |  |  |  |
|                                         |                                                            |              | 450.00                              | Payroll Deduction: (25.00-                  |  |  |  |
|                                         | Other (specify)                                            | 0 0          |                                     | /Páy Period )`                              |  |  |  |
| S                                       | UBTOTAL of Receipts This Page (optional)                   |              |                                     | 182.08                                      |  |  |  |
| $\vdash$                                |                                                            |              |                                     |                                             |  |  |  |
| т                                       | TOTAL This Period (last page this line number only)        |              |                                     |                                             |  |  |  |

| SCHEDULE A (FEC Form 3X)                                                                              |             | Use separate schedule(s)                                                | FOR LINE NUMBER: PAGE 15/21                 |
|-------------------------------------------------------------------------------------------------------|-------------|-------------------------------------------------------------------------|---------------------------------------------|
| ITEMIZED RECEIPTS                                                                                     |             | or each category of the                                                 | (check only one)                            |
| II LIMIZED RECEIP 13                                                                                  |             | Detailed Summary Page                                                   | X 11a 11b 11c 12                            |
| Any information against from such Paparts and Stat                                                    | tomonto mo  | , not be cold or used by any norce                                      | 13 14 15 16 17                              |
| Any information copied from such Reports and Stat or for commercial purposes, other than using the na | ame and add | rnot be sold of used by any personal ress of any political committee to | solicit contributions from such committee.  |
| NAME OF COMMITTEE (In Full)                                                                           |             |                                                                         |                                             |
| Reed Elsevier Inc. Political Action Comn                                                              | nittee      |                                                                         |                                             |
| /                                                                                                     |             |                                                                         |                                             |
| Full Name (Last, First, Middle Initial) <b>A.</b> Matthew D. Mitchell                                 |             |                                                                         | Data of Respire                             |
| Mailing Address 290 Janney Ln                                                                         |             |                                                                         | Date of Receipt                             |
| Maining Addition 290 Janney Lin                                                                       |             |                                                                         | 09 15 2006                                  |
| City                                                                                                  | State       | Zip Code                                                                | Transaction ID: 61010.C6875                 |
| Springboro                                                                                            | OH          | 45066                                                                   | Amount of Each Receipt this Period          |
| FEC ID number of contributing                                                                         | С           |                                                                         | 22.50                                       |
| federal political committee.                                                                          | <u> </u>    |                                                                         | 22.00                                       |
| Name of Employer<br>LexisNexis                                                                        | Occupation  | <u> </u>                                                                | Receipt                                     |
| LexisNexis                                                                                            | VP Sales    | -CFM                                                                    |                                             |
| Receipt For:                                                                                          | Aggregate   | Year-to-Date ▼                                                          | 7                                           |
| Primary General                                                                                       |             | 202.50                                                                  | Payroll Deduction: (11.25-                  |
| Other (specify)                                                                                       |             | 202.50                                                                  | /Pay Period )                               |
| Full Name (Last, First, Middle Initial)                                                               |             |                                                                         |                                             |
| B. John R. Myers                                                                                      |             |                                                                         | Date of Receipt                             |
| Mailing Address 16438 E. Dorado Ave.                                                                  |             |                                                                         | M M / D D / Y Y Y                           |
|                                                                                                       |             |                                                                         | 09 15 2006                                  |
| City                                                                                                  | State       | Zip Code                                                                | Transaction ID: 61010.C6919                 |
| Centennial                                                                                            | CO          | 80015                                                                   | Amount of Each Receipt this Period          |
| FEC ID number of contributing federal political committee.                                            | C           |                                                                         | 50.00                                       |
|                                                                                                       |             |                                                                         | Receipt                                     |
| Name of Employer<br>Tracom                                                                            | Occupation  |                                                                         | neceipi                                     |
|                                                                                                       |             | :/General Mgr                                                           |                                             |
| Receipt For: Primary General                                                                          | Aggregate   | Year-to-Date ▼                                                          |                                             |
| Other (specify)                                                                                       | ' '         | 450.00                                                                  | Payroll Deduction: (25.00-<br>/Pay Period ) |
|                                                                                                       |             |                                                                         | ,                                           |
| Full Name (Last, First, Middle Initial)                                                               |             |                                                                         |                                             |
| C. Jeffrey S. Pfeifer                                                                                 |             |                                                                         | Date of Receipt                             |
| Mailing Address 570 High Street                                                                       |             |                                                                         | 09 15 2006                                  |
| City                                                                                                  | State       | Zip Code                                                                | Transaction ID: 61010.C6873                 |
| Denver                                                                                                | CO          | 80218                                                                   | Amount of Each Receipt this Period          |
| FEC ID number of contributing                                                                         |             |                                                                         |                                             |
| federal political committee.                                                                          | C           |                                                                         | 43.52                                       |
| Name of Employer Occupation                                                                           |             | 1                                                                       | Receipt                                     |
| Name of Employer<br>LexisNexis                                                                        |             | Law Firm Markets                                                        |                                             |
| Receipt For:                                                                                          |             | Year-to-Date ▼                                                          |                                             |
| Primary General                                                                                       |             | 001.00                                                                  | Payroll Deduction: (21.76-                  |
| Other (specify) ▼                                                                                     |             | 391.68                                                                  | /Pay Period )`                              |
|                                                                                                       |             |                                                                         |                                             |
| SUPTOTAL of Possints This Poss (antistral)                                                            |             | _                                                                       | 116.02                                      |
| SUBTOTAL of Receipts This Page (optional)                                                             |             | ······                                                                  |                                             |
| TOTAL This Period (last page this line number on                                                      | nly)        |                                                                         |                                             |

| SCHEDULE A (FEC Form 3X) |                                                                                                    |                              | Use separate schedule(s)                                                  | FOR LINE NUMBER: PAGE 16 / 21                                                            |   |  |
|--------------------------|----------------------------------------------------------------------------------------------------|------------------------------|---------------------------------------------------------------------------|------------------------------------------------------------------------------------------|---|--|
| ITEMIZED RECEIPTS        |                                                                                                    |                              | or each category of the                                                   | (check only one)                                                                         |   |  |
| II LIMIZED RECEIF 13     |                                                                                                    |                              | Detailed Summary Page                                                     | X 11a 11b 11c 12                                                                         |   |  |
| 1                        |                                                                                                    |                              |                                                                           | 17                                                                                       |   |  |
| Ar                       | ny information copied from such Reports and Sta<br>for commercial purposes, other than using the r | atements may<br>name and add | / not be sold or used by any perso<br>dress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |   |  |
|                          | NAME OF COMMITTEE (In Full)                                                                        |                              | , , , , , , , , , , , , , , , , , , , ,                                   |                                                                                          | _ |  |
| $  \rangle$              | Reed Elsevier Inc. Political Action Com                                                            | mittee                       |                                                                           |                                                                                          |   |  |
|                          | riced Elsevier inc. I chilical richari com                                                         | milloc                       |                                                                           |                                                                                          |   |  |
| _                        | Full Name (Last, First, Middle Initial)                                                            |                              |                                                                           |                                                                                          |   |  |
| A.                       | Rodney C. Player                                                                                   |                              |                                                                           | Date of Receipt                                                                          |   |  |
|                          | Mailing Address 4184 Purplefinch Lane                                                              |                              |                                                                           | 09 15 Y Y Y Y Y Y                                                                        |   |  |
|                          | City                                                                                               | State                        | Zip Code                                                                  |                                                                                          |   |  |
|                          | Miamisburg                                                                                         | OH                           | 45342                                                                     | Transaction ID: 61010.C6877                                                              |   |  |
|                          | •                                                                                                  | OII                          | 43342                                                                     | Amount of Each Receipt this Period                                                       | 7 |  |
|                          | FEC ID number of contributing federal political committee.                                         | C                            |                                                                           | 31.02                                                                                    | ı |  |
|                          |                                                                                                    |                              |                                                                           | Receipt                                                                                  | 1 |  |
|                          | Name of Employer<br>LexisNexis                                                                     | Occupation                   |                                                                           | neceipi                                                                                  |   |  |
|                          |                                                                                                    |                              | or Content Enhancemen                                                     |                                                                                          |   |  |
|                          | Receipt For:                                                                                       | Aggregate                    | e Year-to-Date ▼                                                          |                                                                                          |   |  |
|                          | Primary General Other (specify) ▼                                                                  | ' '                          | 279.18                                                                    | Payroll Deduction: (15.51-<br>/Pay Period )                                              |   |  |
|                          | Other (specify)                                                                                    | 0 0                          | 0 0 0 0 0 0 0                                                             | / ay r cried )                                                                           |   |  |
| _                        | Full Name (Last, First, Middle Initial)                                                            |                              |                                                                           | +                                                                                        | _ |  |
| В.                       |                                                                                                    |                              |                                                                           | Date of Receipt                                                                          |   |  |
|                          | Mailing Address 421 Stanwich Road                                                                  |                              |                                                                           | M M / D D / Y Y Y                                                                        |   |  |
|                          |                                                                                                    |                              |                                                                           | 09 15 2006                                                                               |   |  |
|                          | City                                                                                               | State                        | Zip Code                                                                  | Transaction ID: 61010.C6904                                                              |   |  |
|                          | Greenwich                                                                                          | CT                           | 06830                                                                     | Amount of Each Receipt this Period                                                       |   |  |
|                          | FEC ID number of contributing                                                                      | С                            |                                                                           | 90.00                                                                                    | Н |  |
|                          | federal political committee.                                                                       |                              |                                                                           |                                                                                          | _ |  |
|                          | Name of Employer<br>Reed Elsevier Inc                                                              | Occupation                   | n                                                                         | Receipt                                                                                  |   |  |
|                          | Reed Eisevier inc                                                                                  | REI Glob                     | al Legal CEO                                                              |                                                                                          |   |  |
|                          | Receipt For:                                                                                       | Aggregate                    | e Year-to-Date ▼                                                          |                                                                                          |   |  |
|                          | Primary General                                                                                    |                              | 810.00                                                                    | Payroll Deduction: (45.00-                                                               |   |  |
|                          | Other (specify)                                                                                    |                              | 1 1 1 1 1 1 1                                                             | /Pay Period )                                                                            |   |  |
| _                        | Full Name (Last, First, Middle Initial)                                                            |                              |                                                                           |                                                                                          | — |  |
| C.                       | Thomas M. Regan                                                                                    |                              |                                                                           | Date of Receipt                                                                          |   |  |
|                          | Mailing Address 14709 Susan Marie Wa                                                               | .y                           |                                                                           | M M / D D / Y Y Y Y                                                                      |   |  |
|                          |                                                                                                    |                              |                                                                           | 09 15 2006                                                                               |   |  |
|                          | City                                                                                               | State                        | Zip Code                                                                  | Transaction ID: 61010.C6889                                                              |   |  |
|                          | Woodbine                                                                                           | MD                           | 21797                                                                     | Amount of Each Receipt this Period                                                       |   |  |
|                          | FEC ID number of contributing                                                                      | С                            |                                                                           | 76.00                                                                                    | 1 |  |
|                          | federal political committee.                                                                       |                              |                                                                           |                                                                                          | J |  |
|                          | Name of Employer                                                                                   | Occupation                   | n                                                                         | Receipt                                                                                  |   |  |
|                          | LexisNexis                                                                                         | SVP Exe                      | cutive Director Govt In                                                   |                                                                                          |   |  |
|                          | Receipt For:                                                                                       | Aggregate                    | e Year-to-Date ▼                                                          |                                                                                          |   |  |
|                          | Primary General                                                                                    |                              | 684.00                                                                    | Payroll Deduction: (38.00-                                                               |   |  |
|                          | Other (specify)                                                                                    | 0 0                          | 004.00                                                                    | /Páy Period )`                                                                           |   |  |
| _                        |                                                                                                    |                              |                                                                           |                                                                                          | _ |  |
| _                        | LIDTOTAL of December This Day of the Day                                                           |                              |                                                                           | 197.02                                                                                   | 1 |  |
|                          | UBTOTAL of Receipts This Page (optional)                                                           |                              | ······                                                                    |                                                                                          | 4 |  |
| _                        | OTAL This Period (last page this line number o                                                     | inly)                        |                                                                           |                                                                                          |   |  |
|                          |                                                                                                    | <b>j</b> /                   | ······································                                    |                                                                                          |   |  |

| SCHEDULE A (FEC Form 3X) |                                                            |                         | Use separate schedule(s)            | FOR LINE NUMBER: PAGE 17/21                  |  |
|--------------------------|------------------------------------------------------------|-------------------------|-------------------------------------|----------------------------------------------|--|
| ITEMIZED RECEIPTS        |                                                            |                         | or each category of the             | (check only one)                             |  |
| TI EIVIIZED TIEGEII 13   |                                                            |                         | Detailed Summary Page               | X   11a   11b   11c   12   15   16   17      |  |
| Δr                       | ny information copied from such Reports and Sta            | itements may            | not he sold or used by any ners     |                                              |  |
| or                       | for commercial purposes, other than using the n            | ame and add             | dress of any political committee to | o solicit contributions from such committee. |  |
| $\setminus$              | NAME OF COMMITTEE (In Full)                                |                         |                                     |                                              |  |
|                          | Reed Elsevier Inc. Political Action Comr                   | mittee                  |                                     |                                              |  |
| A.                       | Full Name (Last, First, Middle Initial) Thomas K. Rice     |                         |                                     | Date of Receipt                              |  |
|                          | Mailing Address 2026 Via Vineda                            |                         |                                     | 09 / 15 / 2006                               |  |
|                          | City                                                       | State                   | Zip Code                            | Transaction ID: 61010.C6890                  |  |
|                          | San Antonio                                                | TX                      | 78258                               | Amount of Each Receipt this Period           |  |
|                          | FEC ID number of contributing federal political committee. | С                       |                                     | 41.88                                        |  |
|                          | Name of Employer<br>Harcourt Education                     | Occupation<br>Sr VP Op  |                                     | Receipt                                      |  |
|                          | Receipt For:                                               | <u> </u>                | e Year-to-Date ▼                    |                                              |  |
|                          | Primary General                                            |                         | 376.92                              | Payroll Deduction: (20.94-                   |  |
|                          | Other (specify)                                            | 0 0                     | 370.92                              | /Páy Period )՝                               |  |
| В.                       | Full Name (Last, First, Middle Initial) James A. Rumple    |                         |                                     | Date of Receipt                              |  |
|                          | Mailing Address 23080 Barberry Lane                        |                         |                                     | 0 9 1 5 2 0 0 6                              |  |
|                          | City                                                       | State                   | Zip Code                            | Transaction ID: 61010.C6883                  |  |
|                          | California                                                 | MD                      | 20619                               | Amount of Each Receipt this Period           |  |
|                          | FEC ID number of contributing federal political committee. | C                       |                                     | 24.00                                        |  |
|                          | Name of Employer<br>LexisNexis                             | Occupation<br>VP Imagi  | n<br>ing & Manufacturing            | - Receipt                                    |  |
|                          | Receipt For:                                               | <u> </u>                | e Year-to-Date ▼                    |                                              |  |
|                          | Primary General                                            |                         |                                     | Payroll Deduction: (12.00-                   |  |
|                          | Other (specify) ▼                                          | 0 0                     | 216.00                              | Pay Period )                                 |  |
| <u>С</u> .               | Full Name (Last, First, Middle Initial)<br>Kurt P. Sanford |                         |                                     | Date of Receipt                              |  |
|                          | Mailing Address 55 Park Road                               |                         |                                     | 09 15 2006                                   |  |
|                          | City                                                       | State                   | Zip Code                            | Transaction ID: 61010.C6882                  |  |
|                          | Dayton                                                     | OH                      | 45419                               | Amount of Each Receipt this Period           |  |
|                          | FEC ID number of contributing federal political committee. | C                       |                                     | 416.66                                       |  |
|                          | Name of Employer<br>LexisNexis                             | Occupation<br>President | n<br>t & CEO U.S. Corp/Fede         | Receipt                                      |  |
|                          | Receipt For:                                               |                         | e Year-to-Date ▼                    |                                              |  |
|                          | Primary General Other (specify) ▼                          | 0 0                     | 3749.94                             | Payroll Deduction: (208.3-<br>3/Pay Period ) |  |
| s                        | UBTOTAL of Receipts This Page (optional)                   |                         |                                     | 482.54                                       |  |
|                          | OTAL This Period (last page this line number or            |                         |                                     |                                              |  |

| S                                         | CHEDULE A (FEC Form 3X)                                     | FOR LINE NUMBER: PAGE 18/21 |                                     |                                                  |
|-------------------------------------------|-------------------------------------------------------------|-----------------------------|-------------------------------------|--------------------------------------------------|
| ITEMIZED RECEIPTS or each category of the |                                                             |                             | (check only one)                    |                                                  |
| TEMIZED RESERVES                          |                                                             |                             | Detailed Summary Page               | X   11a   11b   11c   12   15   16   17          |
| Δη                                        | y information copied from such Reports and Sta              | tomente may                 | y not be sold or used by any person | <del>                                     </del> |
| or                                        | for commercial purposes, other than using the n             | ame and add                 | lress of any political committee to | o solicit contributions from such committee.     |
| $\setminus$                               | NAME OF COMMITTEE (In Full)                                 |                             |                                     |                                                  |
|                                           | Reed Elsevier Inc. Political Action Comr                    | nittee                      |                                     |                                                  |
| A.                                        | Full Name (Last, First, Middle Initial) Mark L. Seeley      |                             |                                     | Date of Receipt                                  |
|                                           | Mailing Address 34 Otsego Rd                                |                             |                                     | 09 15 2006                                       |
|                                           | City                                                        | State                       | Zip Code                            | Transaction ID: 61010.C6898                      |
|                                           | Worcester                                                   | MA                          | 01609                               | Amount of Each Receipt this Period               |
|                                           | FEC ID number of contributing federal political committee.  | C                           |                                     | 60.00                                            |
|                                           | Name of Employer<br>Elsevier                                | Occupation VP and G         | n<br>General Counsel                | Receipt                                          |
|                                           | Receipt For:                                                | Aggregate                   | Year-to-Date ▼                      |                                                  |
|                                           | Primary General Other (specify) ▼                           |                             | 540.00                              | Payroll Deduction: (30.00-/Pay Period )          |
| В.                                        | Full Name (Last, First, Middle Initial)<br>Scott A. Sessler |                             |                                     | Date of Receipt                                  |
|                                           | Mailing Address 25 Aspen Woods                              |                             |                                     | 09 15 2006                                       |
|                                           | City                                                        | State                       | Zip Code                            | Transaction ID: 61010.C6867                      |
|                                           | Springboro                                                  | OH                          | 45066                               | Amount of Each Receipt this Period               |
|                                           | FEC ID number of contributing federal political committee.  | C                           |                                     | 24.00                                            |
|                                           | Name of Employer<br>LexisNexis                              | Occupation VP Strate        | n<br>egic Business Dev              | Receipt                                          |
|                                           | Receipt For:                                                | Aggregate                   | Year-to-Date ▼                      |                                                  |
|                                           | Primary General Other (specify) ▼                           | 0 0                         | 216.00                              | Payroll Deduction: (12.00-<br>/Pay Period )      |
| <u> </u>                                  | Full Name (Last, First, Middle Initial) John T. Simmons     |                             |                                     | Date of Receipt                                  |
|                                           | Mailing Address 6471 Neville Ct.                            |                             |                                     | 09 15 2006                                       |
|                                           | City                                                        | State                       | Zip Code                            | Transaction ID: 61010.C6876                      |
|                                           | Mason                                                       | OH                          | 45040                               | Amount of Each Receipt this Period               |
|                                           | FEC ID number of contributing federal political committee.  | C                           |                                     | 43.22                                            |
|                                           | Name of Employer<br>LexisNexis                              | Occupation<br>Chief Tec     | n<br>ch/Knowledge Officer           | Receipt                                          |
|                                           | Receipt For:                                                | Aggregate                   | Year-to-Date ▼                      |                                                  |
|                                           | Primary General Other (specify) ▼                           |                             | 388.98                              | Payroll Deduction: (21.61-<br>/Pay Period )      |
| s                                         | UBTOTAL of Receipts This Page (optional)                    |                             |                                     | 127.22                                           |
| T .                                       | OTAL This Period (last page this line number or             | าlv)                        |                                     |                                                  |

## SCHEDULE A (FEC Form 3X)

| SCHEDII                       | I E A (EEC Form 3Y)                                                         |                              |                                                                           | FOR LINE NUMBER:                                        | PAGE 19/21                         |
|-------------------------------|-----------------------------------------------------------------------------|------------------------------|---------------------------------------------------------------------------|---------------------------------------------------------|------------------------------------|
| SCHEDULE A (FEC Form 3X)      |                                                                             |                              | Use separate schedule(s) or each category of the                          | (check only one)                                        |                                    |
| ITEMIZED RECEIPTS             |                                                                             |                              | Detailed Summary Page                                                     | X 11a 11b                                               | 11c  12                            |
|                               |                                                                             |                              | , 0                                                                       | 13 14                                                   | 15 16 17                           |
| Any information or for commer | n copied from such Reports and Sta<br>cial purposes, other than using the r | atements may<br>name and add | y not be sold or used by any perso<br>dress of any political committee to | on for the purpose of solici solicit contributions from | ting contributions such committee. |
| NAME OF                       | COMMITTEE (In Full)                                                         |                              |                                                                           |                                                         |                                    |
| Reed Els                      | evier Inc. Political Action Com                                             | mittee                       |                                                                           |                                                         |                                    |
| Full Name<br>A. Peggy L. Sr   | (Last, First, Middle Initial)<br>nith-Herbst                                |                              |                                                                           | Date of Receipt                                         |                                    |
| Mailing Add                   | dress 1237 Overlook Dr.                                                     |                              |                                                                           | 09 / 15                                                 | 2006                               |
| City                          |                                                                             | State                        | Zip Code                                                                  | Transaction ID: 61                                      | 010.C6913                          |
| Mount Do                      | ora                                                                         | <u>FL</u>                    | 32757                                                                     | Amount of Each Re                                       | ceipt this Period                  |
|                               | mber of contributing tical committee.                                       | C                            |                                                                           |                                                         | 32.64                              |
| Name of E<br>Harcourt E       | mployer<br>ducation                                                         | Occupation                   | n<br>cor-in-Chief Science &                                               | Receipt                                                 |                                    |
| Receipt Fo                    | r-                                                                          |                              | Year-to-Date ▼                                                            | _                                                       |                                    |
| Prima                         |                                                                             | Aggregate                    | Fiedi-10-Date V                                                           | Payroll Deduction                                       | · /16 22                           |
| Othe                          | r (specify) ▼                                                               | 0 0                          | 293.76                                                                    | Pay Period                                              | )                                  |
| Full Name  3. James Smy       | (Last, First, Middle Initial)<br>th                                         |                              |                                                                           | Date of Receipt                                         |                                    |
| Mailing Add                   | dress 7433 Vale View Dr                                                     |                              |                                                                           | 0 9 1 5                                                 | 2006                               |
| City                          |                                                                             | State                        | Zip Code                                                                  | Transaction ID: 61                                      | 010.C6860                          |
| Warrento                      | n                                                                           | VA                           | 20186                                                                     | Amount of Each Re                                       | ceipt this Period                  |
|                               | mber of contributing tical committee.                                       | С                            |                                                                           |                                                         | 50.00                              |
| Name of E<br>LexisNexis       | mployer                                                                     | Occupation Sr VP Bu          | n<br>Isiness Dev & Emerg Mkt                                              | Receipt                                                 |                                    |
| Receipt Fo                    | r:                                                                          | Aggregate                    | e Year-to-Date ▼                                                          |                                                         |                                    |
| Prima<br>Othe                 | ary General<br>r (specify) ♥                                                |                              | 450.00                                                                    | Payroll Deduction<br>/Pay Period                        | : (25.00-<br>)                     |
| Full Name C. Kenneth R.       | (Last, First, Middle Initial)<br>Thompson                                   |                              |                                                                           | Date of Receipt                                         |                                    |
| Mailing Add                   | · · · · · · · · · · · · · · · · · · ·                                       |                              |                                                                           | 0 9 1 5                                                 | 2006                               |
| City                          |                                                                             | State                        | Zip Code                                                                  | Transaction ID: 61                                      | 010.C6909                          |
| <u>Cincinnat</u>              | <u>ii</u>                                                                   | OH                           | 45247                                                                     | Amount of Each Re                                       | ceipt this Period                  |
|                               | mber of contributing tical committee.                                       | C                            |                                                                           |                                                         | 24.00                              |
| Name of E<br>LexisNexis       | mployer                                                                     | Occupation VP Law 8          | n<br>& Acting General Counse                                              | Receipt                                                 |                                    |
| Receipt Fo                    | r:                                                                          |                              | e Year-to-Date ▼                                                          |                                                         |                                    |
| Prima<br>Othe                 | ary ☐ General<br>r (specify) ♥                                              |                              | 216.00                                                                    | Payroll Deduction<br>/Pay Period                        | : (12.00-<br>)                     |
| SUBTOTAL                      | of Receipts This Page (optional)                                            |                              |                                                                           |                                                         | 106.64                             |
|                               |                                                                             |                              |                                                                           | -                                                       |                                    |
| TOTAL This                    | Period (last page this line number of                                       | nly)                         | <b>)</b>                                                                  |                                                         |                                    |

Primary

Other (specify)

General

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

PAGE 20 / 21 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 14 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) Reed Elsevier Inc. Political Action Committee Full Name (Last, First, Middle Initial) Date of Receipt Brian E. Worley Mailing Address 9620 Preserve Place 09 15 2006 City State Zip Code Transaction ID: 61010.C6878 Centerville OH 45458 Amount of Each Receipt this Period FEC ID number of contributing 25.00 C federal political committee. Receipt Name of Employer LexisNexis Occupation Mgr Batch Services Receipt For: Aggregate Year-to-Date ▼ Primary General Payroll Deduction: (12.50-/Pay Period ) 225.00 Other (specify) Full Name (Last, First, Middle Initial) B. Tammy Wright Date of Receipt Mailing Address 270 Sackett Dr. 09 15 2006 City State Zip Code Transaction ID: 61010.C6863 Monroe OH 45050 Amount of Each Receipt this Period FEC ID number of contributing C 46.70 federal political committee. Receipt Name of Employer LexisNexis Occupation VP & Mg Dir Risk Solutions Grp Receipt For: Aggregate Year-to-Date ▼

420.30

| SUBTOTAL of Receipts This Page (optional)           | <b>•</b> | 71.70   |
|-----------------------------------------------------|----------|---------|
| TOTAL This Period (last page this line number only) | <b>•</b> | 4292.23 |

Payroll Deduction: (23.35-/Pay Period )

| 91           | CHEDULE B (FEC Form 3                    | · ν                   |                   | 1                 |                          | T                     | _  |
|--------------|------------------------------------------|-----------------------|-------------------|-------------------|--------------------------|-----------------------|----|
|              | •                                        | ′ Use seper           | rate schedule(s)  | (check only       | NUMBER:                  | PAGE 21 / 21          | _  |
| IT           | EMIZED DISBURSEMEN                       |                       | ategory of the    | 21b               | 7 cn.c,                  | 24 🗆 25 🗆 2           | 6  |
|              |                                          | Detailed S            | Summary Page      | 27                | 28a 28b                  |                       | 0b |
| An           | y Information copied from such Reports   | and Statements may no | t be sold or used | by any person f   | or the purpose of solica | ating contributions   |    |
|              | for commercial purposes, other than usin |                       |                   |                   |                          |                       |    |
| $\setminus$  | NAME OF COMMITTEE (In Full)              |                       |                   |                   |                          |                       |    |
| 17           | Reed Elsevier Inc. Political Action      | Committee             |                   |                   |                          |                       |    |
| $\mathbb{L}$ |                                          |                       |                   |                   |                          |                       |    |
|              | Full Name (Last, First, Middle Initial)  |                       |                   |                   | Transaction ID: 61       | 010.E185              |    |
| Α.           | Castle Campaign Fund                     |                       |                   |                   | Date of Disburseme       | nt                    |    |
|              | Mailing Address D.C.D. 100               |                       |                   |                   | 0 9 O 7                  | 2006                  |    |
|              | Mailing Address P.O Box 133              |                       |                   |                   | 0 0 7                    | 2000                  |    |
|              | City                                     | State                 | Zip Code          |                   | Amount of Each Dis       | bursement this Period | _  |
|              | Wilmington                               | DE                    | 19899-            |                   |                          |                       | 1  |
|              | Purpose of Disbursement                  |                       |                   |                   |                          | 1000.00               |    |
|              |                                          |                       |                   |                   |                          |                       |    |
|              | Candidate Name                           |                       |                   | Category/         |                          |                       |    |
|              | MICHAEL N CASTLE                         |                       |                   | Туре              |                          |                       |    |
|              | Office Sought: X House                   | Disbursement For:     | 2006              |                   |                          |                       |    |
|              | Senate                                   | Primary               | X General         |                   |                          |                       |    |
|              | President                                | Other (spec           | city) 🔻           |                   |                          |                       |    |
|              | State: DE District: 01                   |                       |                   |                   |                          |                       | _  |
| В.           | Full Name (Last, First, Middle Initial)  |                       |                   |                   | Transaction ID: 61       |                       |    |
| υ.           | Mike DeWine for U.S. Senate              |                       |                   |                   | Date of Disburseme       |                       |    |
|              | Mailing Address 8 East Broad St          | reet                  |                   |                   | 09 19                    | 2006                  |    |
|              | 8th Floor                                |                       |                   |                   |                          |                       |    |
|              | City                                     | State                 | Zip Code          |                   | Amount of Each Dis       | bursement this Period |    |
|              | Columbus                                 | ОН                    | 43215-            |                   |                          | 0000.00               | 1  |
|              | Purpose of Disbursement                  |                       |                   | · · ·             |                          | 2000.00               | J  |
|              | Candidate Name                           |                       |                   | Catamani          |                          |                       |    |
|              | RICHARD MICHAEL DEWINE                   |                       |                   | Category/<br>Type |                          |                       |    |
|              | Office Sought: House                     | Disbursement For:     | 2006              | 1,700             |                          |                       |    |
|              | x Senate                                 | Primary               | X General         |                   |                          |                       |    |
|              | President                                | Other (spec           |                   |                   |                          |                       |    |
|              | State: OH District: 00                   | (6ps.                 | <i>→</i>          |                   |                          |                       |    |

| SUBTOTAL of Disbursements This Page (optional)      | <b>•</b> | 3000.00 |
|-----------------------------------------------------|----------|---------|
| TOTAL This Period (last page this line number only) |          | 3000.00 |