

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED
2010 OCT 15 PM 4:25
FEC MAIL CENTER
Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Mid-Atlantic Progressive Leadership Committee

ADDRESS (number and street)

P.O. Box 320156



Check if different
than previously
reported. (ACC)

Alexandria

VA

22330

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00300236

3. IS THIS
REPORT



NEW
(N)

OR



AMENDED
(A)

4. TYPE OF REPORT
(Choose One)

(a). Quarterly Reports:



April 15
Quarterly Report (Q1)



July 15
Quarterly Report (Q2)



October 15
Quarterly Report (Q3)



January 31
Year-End Report (YE)



July 31 Mid-Year
Report (Non-election
Year Only) (MY)



Termination Report
(TER)

(b) Monthly
Report
Due On:



Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)



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



Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)



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



Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c)

12-Day



Primary (12P)



General (12G)



Runoff (12R)

PRE-Election



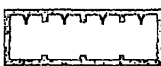
Convention (12C)



Special (12S)

Report for the:

Election on



in the
State of



(d)

30-Day



General (30G)



Runoff (30R)

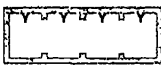


Special (30S)

POST-Election

Report for the:

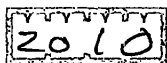
Election on



in the
State of



5. 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.

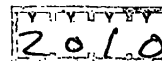
Type or Print Name of Treasurer

Wesley Smith

Signature of Treasurer

Wesley Smith

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
Use
Only

FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Mid-Atlantic Progressive Leadership Committee

Report Covering the Period:

From:

07 ' 01 ' 2010

To:

09 ' 30 ' 2010

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand
January 1, 2010

10,080.99

(b) Cash on Hand at
Beginning of Reporting Period.....

15,734.11

(c) Total Receipts (from Line 19)

36,350.00

11,403.00

(d) Subtotal (add Lines 6(b) and
6(c) for Column A and Lines
6(a) and 6(c) for Column B)

52,084.11

12,411.09

7. Total Disbursements (from Line 31)

36,639.71

10,866.65

8. Cash on Hand at Close of
Reporting Period
(subtract Line 7 from Line 6(d))

15,444.40

15,444.44

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D)

0-

10. Debts and Obligations Owed BY
the Committee (Itemize all on
Schedule C and/or Schedule D)

0-

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Mid-Atlantic Progressive Leadership Committee

Report Covering the Period:

From:

MM / DD / YYYY
07 / 01 / 2010

To:

MM / DD / YYYY
09 / 30 / 2010

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

-0-

45000

(ii) Unitemized.....

363500

1095300

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

363500

1140300

(b) Political Party Committees.....

-0-

-0-

(c) Other Political Committees (such as PACs).....

-0-

-0-

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

363500

1140300

12. Transfers From Affiliated/Other Party Committees.....

NA

NA

13. All Loans Received.....

-0-

-0-

14. Loan Repayments Received.....

NA

NA

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

-0-

-0-

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

NA

NA

17. Other Federal Receipts (Dividends, Interest, etc.).....

-0-

-0-

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

NA

NA

(b) Levin Funds (from Schedule H5).....

NA

NA

(c) Total Transfers (add 18(a) and 18(b))..

NA

NA

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

363500

1140300

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

363500

1140300

10030450774

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

21. Operating Expenditures:
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)
(i) Federal Share

NA

NA

- (ii) Non-Federal Share.....

NA

NA

- (b) Other Federal Operating Expenditures

2218.97

8,826.65

- (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))

2218.97

8,826.65

22. Transfers to Affiliated/Other Party Committees.....

NA

NA

23. Contributions to Federal Candidates/Committees and Other Political Committees.....

0-

0-

24. Independent Expenditures (use Schedule E)

1445.00

2040.00

25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....

NA

NA

26. Loan Repayments Made.....

NA

NA

27. Loans Made.....

0-

0-

28. Refunds of Contributions To:
(a) Individuals/Persons Other Than Political Committees

0-

0-

- (b) Political Party Committees

NA

NA

- (c) Other Political Committees (such as PACs).....

NA

NA

- (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....

0-

0-

29. Other Disbursements

0-

0-

30. Federal Election Activity (2 U.S.C. §431(20))

- (a) Allocated Federal Election Activity (from Schedule H6)

- (i) Federal Share

NA

NA

- (ii) "Levin" Share.....

NA

NA

- (b) Federal Election Activity Paid Entirely With Federal Funds

NA

NA

- (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....

NA

NA

31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..

3,663.97

10,866.65

32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....

3,663.97

10,866.65

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	3635.00	11403.90
34. Total Contribution Refunds (from Line 28(d))	-0-	-0-
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3635.00	11403.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2218.97	8826.65
37. Offsets to Operating Expenditures (from Line 15, page 3)	-0-	-0-
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2218.97	8826.65

10030450776

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE / OF 8

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

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NAME OF COMMITTEE (In Full)

Mid-Atlantic Progressive Leadership Committee

Full Name (Last, First, Middle Initial)

Date of Disbursement

A. Smith, Wesley J.

Mailing Address

P.O. Box 320156

City

Alexandria

State

VA

Zip Code

22320

Purpose of Disbursement

Candidate Name petty cash disbursement

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Amount of Each Disbursement this Period

07' 06' 2010
600.00

B. Smith, Wesley J.

Mailing Address

P.O. Box 320156

City

Alexandria

State

VA

Zip Code

22320

Purpose of Disbursement

Candidate Name petty cash

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

07' 07' 2010

Amount of Each Disbursement this Period

600.00

C. Smith, Wesley J.

Mailing Address

P.O. Box 320156

City

Alexandria

State

VA

Zip Code

22320

Purpose of Disbursement

Candidate Name petty cash

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

07' 09' 2010

Amount of Each Disbursement this Period

600.00

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 8

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Mid-Atlantic Progressive Leadership Committee

Full Name (Last, First, Middle Initial)

A.

Minds, Carol

Mailing Address

7304 Holly Ave.

City

State

Zip Code

Takoma Park

MD

20912

Purpose of Disbursement

lodging

Candidate Name

001
Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

07 ' 13 ' 2010

Amount of Each Disbursement this Period

230.00

B.

Smith, Wesley J.

Mailing Address

P.O. Box 320156

City

State

Zip Code

Alexandria

VA

22320

Purpose of Disbursement

party cash

Candidate Name

001
Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

07 ' 15 ' 2010

Amount of Each Disbursement this Period

20.00

C.

Smith, Wesley J.

Mailing Address

P.O. Box 320156

City

State

Zip Code

Alexandria

VA

22320

Purpose of Disbursement

party cash

Candidate Name

002
Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

07 ' 19 ' 2010

Amount of Each Disbursement this Period

70.00

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

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

10030450778

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 3 OF 8

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Mid-Atlantic Progressive Leadership Committee

Full Name (Last, First, Middle Initial)

A.

Hinds, Carol

Mailing Address

7304 Holly Ave.

City

Takoma Park

State

MD

Zip Code

20912

Purpose of Disbursement

lodging

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

08 / 02 / 2010

Amount of Each Disbursement this Period

230.00

B.

Smith, Wesley J.

Mailing Address

P.O. Box 320156

City

Alexandria

State

VA

Zip Code

22320

Purpose of Disbursement

party cash

Candidate Name

002

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

08 / 02 / 2010

Amount of Each Disbursement this Period

40.00

C.

Smith, Wesley J.

Mailing Address

P.O. Box 320156

City

Alexandria

State

VA

Zip Code

22320

Purpose of Disbursement

party cash

Candidate Name

002

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

08 / 04 / 2010

Amount of Each Disbursement this Period

40.00

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

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 4 OF 8

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Mid-Atlantic Progressive Leadership Committee

Full Name (Last, First, Middle Initial)

A.

VA Employment Commission

Mailing Address

P.O. Box 1358

City

Richmond

State

VA

Zip Code

23218-1358

Purpose of Disbursement

State unemployment

Candidate Name

Fund payment

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

08 ' 06 ' 2010

Amount of Each Disbursement this Period

197

B.

VA Department of Taxation

Mailing Address

P.O. Box 27264

City

Richmond

State

VA

Zip Code

23261

Purpose of Disbursement

State withholding payment

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

08 ' 06 ' 2010

Amount of Each Disbursement this Period

100

C.

Hinds, Carol

Mailing Address

7304 Holly Ave

City

Takoma Park MD

State

Zip Code

20912

Purpose of Disbursement

Lodging and office

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

08 ' 09 ' 2010

Amount of Each Disbursement this Period

23000

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

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

10030450780

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

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

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 8

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Mid-Atlantic Progressive Leadership Committee

Full Name (Last, First, Middle Initial)

A.

Smith, Wesley J.

Mailing Address

P.O. Box 320156

City

Alexandria

State

VA

Zip Code

22320

Purpose of Disbursement

petty cash

Candidate Name

002

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

08 ' 09 ' 2010

Amount of Each Disbursement this Period

4000

B.

Smith, Wesley J.

Mailing Address

P.O. Box 320156

City

Alexandria

State

VA

Zip Code

22320

Purpose of Disbursement

petty cash

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

08 ' 10 ' 2010

Amount of Each Disbursement this Period

3000

C.

Hinds, Carol

Mailing Address

7304 Holly Ave.

City

Takoma Park

State

MD

Zip Code

20912

Purpose of Disbursement

lodging and office

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

08 ' 18 ' 2010

Amount of Each Disbursement this Period

25500

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

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

10030450781

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 8

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Mid-Atlantic Progressive Leadership Committee

Full Name (Last, First, Middle Initial)

A.

Smith, Wesley J.

Mailing Address

P.O. Box 320156

City

Alexandria

State

VA

Zip Code

22320

Purpose of Disbursement

Candidate Name

petty cash

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

09' 01' 2010

Amount of Each Disbursement this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Smith, Wesley J.

Mailing Address

P.O. Box 320156

City

Alexandria

State

VA

Zip Code

22320

Purpose of Disbursement

Candidate Name

petty cash

002

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

09' 03' 2010

Amount of Each Disbursement this Period

48.00

C.

Full Name (Last, First, Middle Initial)

Smith, Wesley J.

Mailing Address

P.O. Box 320156

City

Alexandria

State

VA

Zip Code

22320

Purpose of Disbursement

Candidate Name

petty cash

002

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

09' 07' 2010

Amount of Each Disbursement this Period

51.00

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

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

10030450782

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

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

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 8

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Mid-Atlantic Progressive Leadership Committee

Full Name (Last, First, Middle Initial)

A.

Smith, Wesley J.

Mailing Address

P.O. Box 320156

City

Alexandria

State

VA

Zip Code

22320

Purpose of Disbursement

Candidate Name

petty cash

002

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

09 ' 08 ' 2010

Amount of Each Disbursement this Period

60.00

B.

Smith, Wesley J.

Mailing Address

P.O. Box 320156

City

Alexandria

State

VA

Zip Code

22320

Purpose of Disbursement

Candidate Name

petty cash

002

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

09 ' 17 ' 2010

Amount of Each Disbursement this Period

62.00

C.

Hinds, Carol

Mailing Address

7304 Holly Ave.

City

Takoma Park

State

MD

Zip Code

20912

Purpose of Disbursement

Candidate Name

lodging

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

09 ' 27 ' 2010

Amount of Each Disbursement this Period

230.00

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

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 8

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Mid-Atlantic Progressive Leadership Committee

Full Name (Last, First, Middle Initial)

Date of Disbursement

A.

Hinds, Carol

Mailing Address

7304 Holly Ave.

City

State

Zip Code

Takoma Park

MD

20912

Purpose of Disbursement

lodging

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Amount of Each Disbursement this Period

230.00

Full Name (Last, First, Middle Initial)

Date of Disbursement

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Amount of Each Disbursement this Period

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

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

2090.97

10030450784

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 1 OF 6
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <i>Mid-Atlantic Progressive Leadership Committee</i>	FEC IDENTIFICATION NUMBER <i>C00300236</i>
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle Initial) of Payee <i>Smith, Wesley J.</i>	Date <i>07 / 01 / 2010</i>
Mailing Address <i>P.O. Box 320156</i>	Amount <i>120.00</i>
City <i>Alexandria</i> State <i>VA</i> Zip Code <i>22320</i>	

Purpose of Expenditure <i>salary for college student absence ballot program</i>	Category/Type <i>007</i>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <i>PA</i> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <i>Joe Sestak</i>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose

Calendar Year-To-Date Per Election for Office Sought <i>195.00</i>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
---	---

Full Name (Last, First, Middle Initial) of Payee <i>Smith, Wesley J.</i>	Date <i>07 / 16 / 2010</i>
Mailing Address <i>P.O. Box 320156</i>	Amount <i>100.00</i>
City <i>Alexandria</i> State <i>VA</i> Zip Code <i>22320</i>	

Purpose of Expenditure <i>salary for student absence ballot program</i>	Category/Type <i>007</i>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <i>CA</i> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <i>Barbara Boxer</i>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose

Calendar Year-To-Date Per Election for Office Sought <i>140.00</i>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
---	---

(a) SUBTOTAL of Itemized Independent Expenditures	<i>1445.00</i>
(b) SUBTOTAL of Unitemized Independent Expenditures	<i>-0-</i>
(c) TOTAL Independent Expenditures	<i>1445.00</i>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature *[Signature]*

Date *10 / 14 / 2010*

10030450785

10030450787

PAGE 3 JF 6
FOR LINE 24 OF FORM 3X

FE6AN026

PAGE 4 OF 6
FOR LINE 24 OF FORM 3X

FEC IDENTIFICATION NUMBER ▼

C	0	0	3	0	0	2	3	6
---	---	---	---	---	---	---	---	---

Date

MM ' DD ' YYYY

08 ' 19 ' 2010

Amount

1000

Date

MM/DD/YYYY

08/20/2010

Amount

195.00

Three horizontal rectangular frames, each containing a single horizontal line of text.

Signature

Date _____

Three rectangular frames are shown, each with a label at the top-left corner. The first frame is labeled 'M', the second 'D', and the third 'Y'. Each frame has a small square at the bottom center.

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 5 OF 6
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <i>Mid-Atlantic Progressive Leadership Committee</i>		FEC IDENTIFICATION NUMBER ▼ C00300236	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle Initial) of Payee <i>Smith, Wesley J.</i>		Date 08 / 30 / 2010	
Mailing Address <i>P.O. Box 320156</i>		Amount 47.00	
City <i>Alexandria</i>	State <i>VA</i>	Zip Code <i>22320</i>	
Purpose of Expenditure <i>Salary for college student voter registration</i>	Category/Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <i>NH</i> District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: <i>Paul Hodes</i>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 47.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee <i>Smith, Wesley J.</i>		Date 09 / 09 / 2010	
Mailing Address <i>P.O. Box 320156</i>		Amount 92.00	
City <i>Alexandria</i>	State <i>VA</i>	Zip Code <i>22320</i>	
Purpose of Expenditure <i>Salary for student absence ballot program</i>	Category/Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <i>OH</i> District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: <i>Lee Fisher</i>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 92.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures		139.00	
(b) SUBTOTAL of Unitemized Independent Expenditures		0.00	
(c) TOTAL Independent Expenditures		139.00	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature _____		Date 09 / 09 / 2010	

PAGE 6 OF 6
FOR LINE 24 OF FORM 3X

FEC Schedule E (Form 3X) Rev. 02/2003

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

☒ Hand Delivered Date of Receipt
10/15/10

☐ USPS First Class Mail Postmarked

☐ USPS Registered/Certified Postmarked (R/C)

☐ USPS Priority Mail Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label ☐

☐ USPS Express Mail Postmarked

☐ Postmark Illegible

☐ No Postmark

☐ Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery ☐

☐ Received from House Records & Registration Office Date of Receipt

☐ Received from Senate Public Records Office Date of Receipt

☐ Received from Electronic Filing Office Date of Receipt

☐ Other (Specify): Date of Receipt or Postmarked

Chap
PREPARER
(3/2005)

10/18/10
DATE PREPARED

10030450791