

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

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

MONTGOMERY COUNTY DEMOCRATIC COMMITTEE FEDERAL ACCT

ADDRESS (number and street) PO Box 857

Check if different than previously reported. (ACC)

NORRISTOWN PA 19404 0857

2. **FEC IDENTIFICATION NUMBER** C00323253

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

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

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12G)	

Election on _____ in the State of _____

(d) 30-Day **Post -Election** Report for the:

<input checked="" type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on 11 04 2008 in the State of PA

5. Covering Period 10 01 2008 through 11 24 2008

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 Kelbin R Carolina

Signature of Treasurer Electronically Filed by Kelbin R Carolina Date 12 12 2008

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)
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
MONTGOMERY COUNTY DEMOCRATIC COMMITTEE FEDERAL ACCT

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		3921.92
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	1197.48									
(c) Total Receipts (from Line 19)	20555.00	30555.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	21752.48	34476.92								
7. Total Disbursements (from Line 31)	19813.10	32537.54								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1939.38	1939.38								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

MONTGOMERY COUNTY DEMOCRATIC COMMITTEE FEDERAL ACCT

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

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	5200.00	10200.00
(i) Itemized (use Schedule A)	11750.00	11750.00
(ii) Unitemized	16950.00	21950.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	5000.00
(c) Other Political Committees (such as PACs)	16950.00	26950.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
12. Transfers From Affiliated/Other Party Committees	3605.00	3605.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	20555.00	30555.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	20555.00	30555.00

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) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	1543.06
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	1543.06
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	6000.00	6000.00
24. Independent Expenditure (use Schedule E)	7208.10	7208.10
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	3605.00	3605.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	3000.00	14181.38
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))..	19813.10	32537.54
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19813.10	32537.54

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	16950.00	26950.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16950.00	26950.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	1543.06
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	1543.06

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 13
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
MONTGOMERY COUNTY DEMOCRATIC COMMITTEE FEDERAL ACCT

A.	Full Name (Last, First, Middle Initial) David Broida		Date of Receipt
	Mailing Address 55 Booth Lane		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Haverford	PA	19041
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: SA11AI.4533
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="3645.00"/>	<input type="text" value="40.00"/>

B.	Full Name (Last, First, Middle Initial) David Broida		Date of Receipt
	Mailing Address 55 Booth Lane		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Haverford	PA	19041
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: SA11AI.4561
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="3805.00"/>	<input type="text" value="160.00"/>

C.	Full Name (Last, First, Middle Initial) Michael P. Clarke		Date of Receipt
	Mailing Address 506 Lantern Lane		<input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Philadelphia	PA	19128
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Rudolph, Pizzo & Clarke, LLC.		Occupation Attorney	Transaction ID: SA11AI.4378
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="2500.00"/>	<input type="text" value="2500.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2700.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 13	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MONTGOMERY COUNTY DEMOCRATIC COMMITTEE FEDERAL ACCT

A.	Full Name (Last, First, Middle Initial) Keith and Catherine Henderson		Date of Receipt
	Mailing Address 245 Beachview Avenue		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Manahawkin	NJ	08005
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer T & M Associates		Occupation Engineer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	
			Transaction ID: SA11AI.4831
			Amount of Each Receipt this Period <input type="text" value="2500.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2500.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="5200.00"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 13
(check only one)

<input type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
<input checked="" type="checkbox"/>									X								

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NAME OF COMMITTEE (In Full)
MONTGOMERY COUNTY DEMOCRATIC COMMITTEE FEDERAL ACCT

A.

Full Name (Last, First, Middle Initial)
David Broida

Mailing Address 55 Booth Lane

City State Zip Code
Haverford PA 19041

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3605.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 8

Transaction ID: SA13.4381

Amount of Each Receipt this Period
3605.00

Loan

SUBTOTAL of Receipts This Page (optional)	▶	3605.00
TOTAL This Period (last page this line number only)	▶	3605.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MONTGOMERY COUNTY DEMOCRATIC COMMITTEE FEDERAL ACCT

A. Full Name (Last, First, Middle Initial) THE BOB ROGGIO FOR CONGRESS COMM <hr/> Mailing Address 23 Eastwick Rd Suite 101 <hr/> City Malvern State PA Zip Code 19355 <hr/> Purpose of Disbursement Contribution <hr/> Candidate Name ROBERT ROGGIO <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4833 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 1500.00
	Category/ Type
B. Full Name (Last, First, Middle Initial) NATIONAL JEWISH DEMOCRATIC COUNCIL POLITICAL ACTION COM- MITTEE <hr/> Mailing Address 777 North Capitol Street NW #305 <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement Contribution <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4842 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 4500.00
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

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

6000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 / 13

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input checked="" 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)

MONTGOMERY COUNTY DEMOCRATIC COMMITTEE FEDERAL ACCT

A.

Full Name (Last, First, Middle Initial)

David Broida

Transaction ID: SB26.4835

Date of Disbursement

^M 1	^M 0	/	^D 3	^D 1	/	^Y 2	^Y 0	^Y 0	^Y 8
----------------	----------------	---	----------------	----------------	---	----------------	----------------	----------------	----------------

Mailing Address 55 Booth Lane

City Haverford State PA Zip Code 19041

Amount of Each Disbursement this Period

3605.00

Purpose of Disbursement
Loan Repayment

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

3605.00

TOTAL This Period (last page this line number only)

3605.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 11 / 13

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

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NAME OF COMMITTEE (In Full)

MONTGOMERY COUNTY DEMOCRATIC COMMITTEE FEDERAL ACCT

A.

Full Name (Last, First, Middle Initial)

Katie Maher

Transaction ID: SB29.4837

Date of Disbursement

^M 1	^M /	^D 0	^D 7	/	^Y 2	^Y 0	^Y 0	^Y 8
----------------	----------------	----------------	----------------	---	----------------	----------------	----------------	----------------

Mailing Address 8311 Cadwalader Avenue

City State Zip Code
Elkins Park PA 19027

Amount of Each Disbursement this Period

3000.00

Purpose of Disbursement
Consultant

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

3000.00

SCHEDULE C (FEC Form 3X)

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

LOANS

NAME OF COMMITTEE (In Full)
MONTGOMERY COUNTY DEMOCRATIC COMMITTEE FEDERAL ACCT
Transaction ID: SC/10.4381

LOAN SOURCE Full Name (Last, First, Middle Initial) David Broida	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 55 Booth Lane	
City Haverford State PA ZIP Code 19041	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3605.00	3605.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 10 D D 19 Y Y Y Y 2008	11/04/2008	0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)	0.00
TOTALS This Period (last page in this line only)	0.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MONTGOMERY COUNTY DEMOCRATIC COMMITTEE FEDERAL ACCT	FEC IDENTIFICATION NUMBER C C00323253
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
The Jewish Exponent

Mailing Address
2100 Arch Street

City State Zip Code
Philadelphia PA 19103

Purpose of Expenditure Category/Type
Newspaper 004

Name of Federal Candidate supported or Opposed by expenditure:
BARACK OBAMA

Calendar Year-To-Date Per Election for Office Sought 3604.05

Date
MM / DD / YYYY
10 / 18 / 2008

Amount
3604.05

Transaction ID: SE.4875

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

Full Name (Last, First, Middle, Initial) of Payee
The Jewish Exponent

Mailing Address
2100 Arch Street

City State Zip Code
Philadelphia PA 19103

Purpose of Expenditure Category/Type
Newspaper Ad 004

Name of Federal Candidate supported or Opposed by expenditure:
BARACK OBAMA

Calendar Year-To-Date Per Election for Office Sought 7208.10

Date
MM / DD / YYYY
10 / 27 / 2008

Amount
3604.05

Transaction ID: SE.4876

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

(a) SUBTOTAL of Itemized Independent Expenditures 7208.10

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures 7208.10

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.

Kelbin R Carolina
Signature

Date MM / DD / YYYY
12 / 12 / 2008