

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) PO Box 628008 Middleton WI 53562 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00409136 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 06 01 2007 through 06 30 2007

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 Cole F Leystra-Assistant Treasurer Signature of Treasurer Electronically Filed by Cole F Leystra-Assistant Treasurer Date 07 20 2007

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Progressive Patriots Fund

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="right">58929.85</td></tr></table>	58929.85
Y	Y	Y	Y									
2	0	0	7									
58929.85												
(b) Cash on Hand at Beginning of Reporting Period .....	<table border="1" style="width: 100%;"><tr><td align="right">165099.46</td></tr></table>	165099.46										
165099.46												
(c) Total Receipts (from Line 19) .....	<table border="1" style="width: 100%;"><tr><td align="right">93944.51</td></tr></table>	93944.51	<table border="1" style="width: 100%;"><tr><td align="right">685628.53</td></tr></table>	685628.53								
93944.51												
685628.53												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<table border="1" style="width: 100%;"><tr><td align="right">259043.97</td></tr></table>	259043.97	<table border="1" style="width: 100%;"><tr><td align="right">744558.38</td></tr></table>	744558.38								
259043.97												
744558.38												
7. Total Disbursements (from Line 31) .....	<table border="1" style="width: 100%;"><tr><td align="right">82916.34</td></tr></table>	82916.34	<table border="1" style="width: 100%;"><tr><td align="right">568430.75</td></tr></table>	568430.75								
82916.34												
568430.75												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table border="1" style="width: 100%;"><tr><td align="right">176127.63</td></tr></table>	176127.63	<table border="1" style="width: 100%;"><tr><td align="right">176127.63</td></tr></table>	176127.63								
176127.63												
176127.63												
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
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  
Progressive Patriots Fund

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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	52995.05	308442.05
(i) Itemized (use Schedule A) .....	40827.83	373627.73
(ii) Unitemized .....	93822.88	682069.78
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	2500.00
(c) Other Political Committees (such as PACs) .....	0.00	93822.88
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	93822.88	684569.78
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	322.59
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	121.63	736.16
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)) .....	93944.51	685628.53
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	93944.51	685628.53

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	79391.34	520165.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	79391.34	520165.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3500.00	43500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	25.00	4265.00
(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)) .....	25.00	4265.00
29. Other Disbursements.....	0.00	500.00
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))..	82916.34	568430.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	82916.34	568430.75

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	93822.88	684569.78
34. Total Contribution Refunds (from Line 28(d)) .....	25.00	4265.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	93797.88	680304.78
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	79391.34	520165.75
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	322.59
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	79391.34	519843.16

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 81
	<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)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Tracy Abbott Cook

Mailing Address 520 South Curson

City State Zip Code  
Los Angeles CA 90036

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

Name of Employer Self-Employed Occupation  
Writer/Producer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
06 / 01 / 2007

Transaction ID: SA11A1.98588

Amount of Each Receipt this Period  
350.00

**B.** Full Name (Last, First, Middle Initial)  
Jeanne Abmayr

Mailing Address 107 Jimney Drive

City State Zip Code  
Westford MA 01886

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

Name of Employer Sonic Software Cooperation Occupation  
Director of Marketing Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
06 / 21 / 2007

Transaction ID: SA11A1.98589

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
James Allen

Mailing Address 1889 Hertige Way

City State Zip Code  
Yountville CA 94599

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

Name of Employer Sequoia Grove Vineyards Occupation  
Winemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
06 / 27 / 2007

Transaction ID: SA11A1.98606

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	650.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 81
	<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	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A.</b> Nancy Anderson		Date of Receipt M M / D D / Y Y Y Y 06 / 19 / 2007
Mailing Address 47 Sturdivant Road		Transaction ID: SA11A1.98623
City State Zip Code Cumberland Foresid ME 04110	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed Occupation Student		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Paula Anderson		Date of Receipt M M / D D / Y Y Y Y 06 / 27 / 2007
Mailing Address 2427 Park Ave		Transaction ID: SA11A1.98625
City State Zip Code Minneapolis MN 55404	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Homemaker Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Michelle Aronson		Date of Receipt M M / D D / Y Y Y Y 06 / 05 / 2007
Mailing Address 1359 Brinkley Avenue		Transaction ID: SA11A1.98651
City State Zip Code Los Angeles CA 90049	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Aronson Management Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 81
	<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	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A.</b> Gilbert Bachman		Date of Receipt M M / D D / Y Y Y Y 06 / 08 / 2007	
Mailing Address 1824 Royal Palm Way		Transaction ID: SA11A1.98661	
City State Zip Code Boca Raton FL 33432	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Paris Barclay		Date of Receipt M M / D D / Y Y Y Y 06 / 04 / 2007	
Mailing Address 5419 Hollywood Blvd Suite C710		Transaction ID: SA11A1.98677	
City State Zip Code Los Angeles CA 90027	Amount of Each Receipt this Period 750.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self-Employed	Occupation Director/Producer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Deanna Bates		Date of Receipt M M / D D / Y Y Y Y 06 / 07 / 2007	
Mailing Address 2212 North Frannea Drive		Transaction ID: SA11A1.98688	
City State Zip Code Tucson AZ 85712	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 81
	<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	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Julie Bergman</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 05 / 2007	
Mailing Address 2501 Colorado Ave Suite 350		Transaction ID: SA11A1.98720	
City State Zip Code Santa Monica CA 90404	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Balcony Films	Occupation Filmmaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Jean-Paul Bierny</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 07 / 2007	
Mailing Address 15 East Calle Conquista		Transaction ID: SA11A1.98730	
City State Zip Code Tucson AZ 85716	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Radiology Ltd.	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Marilyn Bitner</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 05 / 2007	
Mailing Address 3704 Barham Blvd E		Transaction ID: SA11A1.98737	
City State Zip Code Los Angeles CA 90068	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Plan A Locations	Occupation Entertainment Scout		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A.</b> Blair Bower		Date of Receipt M M / D D / Y Y Y Y 06 / 18 / 2007	
Mailing Address 3718 25th St N		Transaction ID: SA11A1.98778	
City Arlington	State VA	Amount of Each Receipt this Period 200.00	
Zip Code 22207		FEC ID number of contributing federal political committee. C	
Name of Employer Self-Employed	Occupation Consultant	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 350.00			

Full Name (Last, First, Middle Initial) <b>B.</b> Blair Bower		Date of Receipt M M / D D / Y Y Y Y 06 / 22 / 2007	
Mailing Address 3718 25th St N		Transaction ID: SA11A1.98779	
City Arlington	State VA	Amount of Each Receipt this Period 150.00	
Zip Code 22207		FEC ID number of contributing federal political committee. C	
Name of Employer Self-Employed	Occupation Consultant	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 500.00			

Full Name (Last, First, Middle Initial) <b>C.</b> Beth Broderick		Date of Receipt M M / D D / Y Y Y Y 06 / 01 / 2007	
Mailing Address 1935 Palmerston		Transaction ID: SA11A1.100446	
City Los Angeles	State CA	Amount of Each Receipt this Period 2350.00	
Zip Code 90027		FEC ID number of contributing federal political committee. C	
Name of Employer Self-Employed	Occupation Actress	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 2350.00		In-kind - Event Expense: Catering	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 81
	<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	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Wanda Brown

Mailing Address 1881 Golf View Drive

City State Zip Code  
River Falls WI 54022

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

Name of Employer Occupation  
Pierce County Democrats Chair

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
06 / 14 / 2007

Transaction ID: SA11A1.98809

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Ila June Brown-Pratt

Mailing Address 519 E Walnut St

City State Zip Code  
River Falls WI 54022

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2007

Transaction ID: SA11A1.98811

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
John Bush

Mailing Address 17242 Henry St.

City State Zip Code  
Lansing IL 60438

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

Name of Employer Occupation  
University of Chicago Service Representative

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
MM / DD / YYYY  
06 / 06 / 2007

Transaction ID: SA11A1.98835

Amount of Each Receipt this Period  
60.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	560.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 81
	<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	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Hazem Chehabi, MD

Mailing Address 145 Irvine Cove Court

City Laguna Beach State CA Zip Code 92651

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

Name of Employer Newport Diagnostic Center Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
06 / 06 / 2007

Transaction ID: SA11A1.98866

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
William Clark

Mailing Address 1547 Michael Lane

City Pacific Palisades State CA Zip Code 90272

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
06 / 05 / 2007

Transaction ID: SA11A1.98878

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Kimble Cohn

Mailing Address 2561 East Calle Sin Controversia

City Tucson State AZ Zip Code 85170

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

Name of Employer Self-Employed Occupation Architect/Developer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
06 / 07 / 2007

Transaction ID: SA11A1.100369

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 81
	<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	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
David Conney, M.D.

Mailing Address 10601 Wilshire Blvd.

City State Zip Code  
Los Angeles CA 90027

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

Name of Employer Self-Employed Occupation  
Self-Employed Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 05 / 2007

Transaction ID: SA11A1.98896

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Joe Croyle

Mailing Address 3202 Dos Palos Drive

City State Zip Code  
Los Angeles CA 90068

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

Name of Employer Self-Employed Occupation  
Self-Employed Entertainer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 01 / 2007

Transaction ID: SA11A1.100444

Amount of Each Receipt this Period  
1000.00

In-kind - Event Expense:  
Music

**C.** Full Name (Last, First, Middle Initial)  
Dorothy Dreher

Mailing Address 5643 Schnable Rd

City State Zip Code  
Black Creek WI 54106

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

Name of Employer Retired Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
06 / 06 / 2007

Transaction ID: SA11A1.100461

Amount of Each Receipt this Period  
200.00

Reattribute: from John Dreher

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 81
	<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	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
John Dreher

Mailing Address 5643 Schnable Rd

City State Zip Code  
Black Creek WI 54106

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

Name of Employer Occupation  
Lawrence University Professor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
05 / 30 / 2007

Transaction ID: SA11A1.97167

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
John Dreher

Mailing Address 5643 Schnable Rd

City State Zip Code  
Black Creek WI 54106

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

Name of Employer Occupation  
Lawrence University Professor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
06 / 06 / 2007

Transaction ID: SA11A1.100460

Amount of Each Receipt this Period  
-200.00

Reattribute: to Dorothy Dreher

**C.** Full Name (Last, First, Middle Initial)  
Susan Dullabh

Mailing Address 1354 North Bundy Drive

City State Zip Code  
Los Angeles CA 90049

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

Name of Employer Occupation  
Dullabh Danis Consulting Financial Business Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
06 / 18 / 2007

Transaction ID: SA11A1.99018

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	50.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 81
	<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	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Jodie Evans

Mailing Address 2010 Linden Avenue

City State Zip Code  
Venice CA 90291-3912

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

Name of Employer Code Pink Occupation Co-Founder

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 11 / 2007

Transaction ID: SA11A1.100458

Amount of Each Receipt this Period  
500.00

Reattribute: from Max Pal-evsky

**B.** Full Name (Last, First, Middle Initial)  
Donald Farkas

Mailing Address 15518 Via Cantare St.

City State Zip Code  
Los Angeles CA 90077

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

Name of Employer Self-Employed Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 05 / 2007

Transaction ID: SA11A1.99073

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Harold Feingold

Mailing Address PO Box 1142  
3020 N. 6th St.

City State Zip Code  
Sheboygan WI 53082

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

Name of Employer Sheboygan Waste Material Co. Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 19 / 2007

Transaction ID: SA11A1.99079

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 81
	<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)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Paul Figueiredo</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 04 / 2007	
Mailing Address 10382 Rossbury Pl		<b>Transaction ID: SA11A1.99090</b>	
City State Zip Code Los Angeles CA 90064		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Sony/Nelson Shelton Writer/Realtor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Margaret Flood</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 05 / 2007	
Mailing Address 9456 Fernbury Street		<b>Transaction ID: SA11A1.99105</b>	
City State Zip Code Cypress CA 90630		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation San Clemente High School Teacher - Education Specialist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Jeanette Foster</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 27 / 2007	
Mailing Address 6205 Mineral Point, Apt. 324		<b>Transaction ID: SA11A1.99114</b>	
City State Zip Code Madison WI 53705		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 81
	<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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Shirley Freedland

Mailing Address 3737 Atlantic #612A

City Long Beach State CA Zip Code 90807

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
06 / 27 / 2007

Transaction ID: SA11A1.99126

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Bernard Friedman

Mailing Address 7667 Seattle Place

City Los Angeles State CA Zip Code 90046

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

Name of Employer Self-Employed Occupation Independent Producer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
MM / DD / YYYY  
05 / 24 / 2007

Transaction ID: SA11A1.97506

Amount of Each Receipt this Period  
2500.00

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Bernard Friedman

Mailing Address 7667 Seattle Place

City Los Angeles State CA Zip Code 90046

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

Name of Employer Self-Employed Occupation Independent Producer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 06 / 2007

Transaction ID: SA11A1.100463

Amount of Each Receipt this Period  
-2500.00

Reattribute: to Lesley Hyatt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>-2400.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 81
	<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	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Larry Gellman

Mailing Address 4405 North Black Rock Drive

City Tucson State AZ Zip Code 85750

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

Name of Employer Robert W. Baird & Co. Inc. Occupation Stockbroker/Senior Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 0 2 / 2 0 0 7

Transaction ID: SA11A1.100448

Amount of Each Receipt this Period  
 380.00

In-kind - Event Expense:  
Food & Beverage

**B.** Full Name (Last, First, Middle Initial)  
Larry Gellman

Mailing Address 4405 North Black Rock Drive

City Tucson State AZ Zip Code 85750

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

Name of Employer Robert W. Baird & Co. Inc. Occupation Stockbroker/Senior Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 880.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 0 5 / 2 0 0 7

Transaction ID: SA11A1.99154

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
Stefan Gerber

Mailing Address 9720 Wilshire Blvd, 3rd Floor

City Beverly Hills State CA Zip Code 90212

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

Name of Employer Perry & Neidorf LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 0 5 / 2 0 0 7

Transaction ID: SA11A1.99159

Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1380.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 81
	<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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Michael Grady

Mailing Address 1001 Wilson Blvd, Apt 105

City State Zip Code  
Arlington VA 22209

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

Name of Employer  
Willkie, Farr & Gallagher, LLP

Occupation  
Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2007

Transaction ID: SA11A1.99198

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Naomi Greenberg

Mailing Address 3408 Washington Ave

City State Zip Code  
Windsor Mill MD 21244

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

Name of Employer  
Not Employed

Occupation  
Not Employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
MM / DD / YYYY  
06 / 25 / 2007

Transaction ID: SA11A1.99212

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Julie Grist

Mailing Address 907 South Windsor Blvd

City State Zip Code  
Los Angeles CA 90019

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

Name of Employer  
Self-Employed

Occupation  
Author/Illustrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
06 / 05 / 2007

Transaction ID: SA11A1.99224

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 81
	<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)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Rascha Hall</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 7
Mailing Address 6603 Madeline Cover Drive		<b>Transaction ID: SA11A1.99246</b>
City State Zip Code Rancho Palos Verde CA 90275	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer The Aerospace Corporation	Occupation Scientist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Eric Halverson</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 1 / 2 0 0 7
Mailing Address 3339 N Dousman St		<b>Transaction ID: SA11A1.99249</b>
City State Zip Code Milwaukee WI 53212	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self-Employed	Occupation Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>C. Paul Hambleton</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 7
Mailing Address 1062 220th Street		<b>Transaction ID: SA11A1.99250</b>
City State Zip Code Baldwin WI 54002	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer West Central Uniserv	Occupation Uniserv Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 81
	<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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
John Heins

Mailing Address 400 Fowler Ave.

City Pelham State NY Zip Code 10803

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 2 2 / 2 0 0 7

Transaction ID: SA11A1.99279

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Jennifer Higgins

Mailing Address 14211 Olson Drive

City Fall Creek State WI Zip Code 54742

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

Name of Employer Self-Employed Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 2 1 / 2 0 0 7

Transaction ID: SA11A1.99293

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Leonard Hill

Mailing Address 350 North June Street

City Los Angeles State CA Zip Code 90004

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

Name of Employer Self-Employed Occupation Filmmaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 1 4 / 2 0 0 7

Transaction ID: SA11A1.99296

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 81
	<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	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Lesley Hyatt

Mailing Address 7667 Seattle Place

City State Zip Code  
Los Angeles CA 90046

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

Name of Employer Self-Employed Occupation  
Occupation  
Writer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 0 6 / 2 0 0 7

Transaction ID: SA11A1.100464

Amount of Each Receipt this Period  
2500.00

Reattribute: from Bernard Friedman

**B.** Full Name (Last, First, Middle Initial)  
Edward Jones

Mailing Address 2161 Via Escalera

City State Zip Code  
Los Altos CA 94024

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

Name of Employer Retired Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 7

Transaction ID: SA11A1.99378

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Walter Kaye

Mailing Address 475 Park Ave

City State Zip Code  
New York NY 10022

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

Name of Employer Retired Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 7

Transaction ID: SA11A1.99413

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	8000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 81
	<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	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Joan Kaye Cauthorn

Mailing Address 30 N Camino Espanol

City Tucson State AZ Zip Code 85716

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

Name of Employer Self-Employed Occupation Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2237.20

Date of Receipt  
06 / 02 / 2007

**Transaction ID:** SA11A1.100450

Amount of Each Receipt this Period  
2237.20

In-kind - Event Expense:  
Catering

**B.** Full Name (Last, First, Middle Initial)  
Joan Kaye Cauthorn

Mailing Address 30 N Camino Espanol

City Tucson State AZ Zip Code 85716

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

Name of Employer Self-Employed Occupation Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4737.20

Date of Receipt  
06 / 29 / 2007

**Transaction ID:** SA11A1.99410

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
Sharon Kinkad

Mailing Address 444 County Rd. F

City Hudson State WI Zip Code 54016

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
06 / 25 / 2007

**Transaction ID:** SA11A1.99429

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4987.20</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 81
	<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	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Tamar Kreiswirth

Mailing Address 6501 North Calle Lottie

City Tucson State AZ Zip Code 85718

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

Name of Employer Tucson Relator Occupation Real Estate Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
06 / 07 / 2007

Transaction ID: SA11A1.99470

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
John Krieger

Mailing Address 140 South Lake Ave, Suite 352

City Pasadena State CA Zip Code 91101

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

Name of Employer Self-Employed Occupation Financial Planner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
06 / 05 / 2007

Transaction ID: SA11A1.99475

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Roberta Krinsky

Mailing Address 5117 Lake Mendota Drive

City Madison State WI Zip Code 53705

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

Name of Employer Self-Employed Occupation Writer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
06 / 28 / 2007

Transaction ID: SA11A1.99477

Amount of Each Receipt this Period  
350.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1850.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 81
	<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)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
John Kroll

Mailing Address N30 W23066 Pineview Way #8

City State Zip Code  
Pewaukee WI 53072

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

Name of Employer Occupation  
Catalyst International Computer Programmer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
06 / 25 / 2007

Transaction ID: SA11A1.99480

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Ruby Krouwer

Mailing Address 26 Parks Dr.

City State Zip Code  
Sherborn MA 01170

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

Name of Employer Occupation  
Not Employed Not Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
06 / 21 / 2007

Transaction ID: SA11A1.99481

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Luis Lainer

Mailing Address 10788 Bellagio Rd.

City State Zip Code  
Los Angeles CA 90077

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

Name of Employer Occupation  
Lainer Development, Inc Real Estate Investments

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
06 / 11 / 2007

Transaction ID: SA11A1.99492

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	650.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 81
	<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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
John Lees

Mailing Address 923 Pheasant Ct.

City State Zip Code  
Sister Bay WI 54234

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt  
06 / 04 / 2007

Transaction ID: SA11A1.99516

Amount of Each Receipt this Period  
20.00

**B.** Full Name (Last, First, Middle Initial)  
Douglas Levy, P.C.

Mailing Address 5661 North Placita Stilbayo

City State Zip Code  
Tucson AZ 85718

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

Name of Employer Self-Employed Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
06 / 05 / 2007

Transaction ID: SA11A1.99535

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Stuart Levy

Mailing Address 1108 Foley Ave

City State Zip Code  
Champaign IL 61820

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

Name of Employer University of Illinois Occupation Computer Programmer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
06 / 30 / 2007

Transaction ID: SA11A1.99536

Amount of Each Receipt this Period  
125.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1145.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 81
	<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)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Louis Mallmann

Mailing Address 2631 N. 29th St.

City State Zip Code  
Sheboygan WI 53083

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

Name of Employer Retired Court Reporter Occupation Retired Court Reporter

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
06 / 07 / 2007

Transaction ID: SA11A1.99580

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Jennifer Marsden

Mailing Address PO Box 1846

City State Zip Code  
Cave Junction OR 97523

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

Name of Employer Three Rivers School District Occupation Grants Administrator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1221.30

Date of Receipt  
06 / 02 / 2007

Transaction ID: SA11A1.100489

Amount of Each Receipt this Period  
1221.30

In-kind - Event Expense:  
Invitations

**C.** Full Name (Last, First, Middle Initial)  
Steven Marsden

Mailing Address PO Box 1846

City State Zip Code  
Cave Junction OR 97523-1846

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1469.62

Date of Receipt  
06 / 02 / 2007

Transaction ID: SA11A1.100492

Amount of Each Receipt this Period  
469.62

In-kind - Event Expense:  
Beverages

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1790.92
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 81
	<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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Steven Marsden

Mailing Address PO Box 1846

City State Zip Code  
Cave Junction OR 97523-1846

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5469.62

Date of Receipt  
06 / 07 / 2007

Transaction ID: SA11A1.99594

Amount of Each Receipt this Period  
4000.00

\$469.62 reattributed to spouse on 7/18

**B.** Full Name (Last, First, Middle Initial)  
Rebecca Massey

Mailing Address N740 515th St.

City State Zip Code  
Menomonee WI 54757

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

Name of Employer Occupation  
Menomonee Public Schools Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
06 / 27 / 2007

Transaction ID: SA11A1.99603

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
David Matthews

Mailing Address N7393 950th St.

City State Zip Code  
River Falls WI 54022

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
06 / 29 / 2007

Transaction ID: SA11A1.99606

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 81
	<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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Polly McCormack

Mailing Address 716 Valley Way

City Hopkins State MN Zip Code 55305

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

Name of Employer West Metro Ophthalmology Occupation MD

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
06 / 30 / 2007

Transaction ID: SA11A1.99625

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
JoJene Mills

Mailing Address 7010 North Camino Sin Vacas

City Tucson State AZ Zip Code 85718

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

Name of Employer Self-Employed Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
06 / 27 / 2007

Transaction ID: SA11A1.99670

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Robert M Molloy, MD

Mailing Address 1522 N. Prospect #806

City Milwaukee State WI Zip Code 53202

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

Name of Employer Self-Employed Occupation MD

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
06 / 25 / 2007

Transaction ID: SA11A1.99680

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 81
	<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	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Catherine Morton

Mailing Address PO Box 751

City Tucson State AZ Zip Code 85702

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

Name of Employer Self-Employed Occupation Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
06 / 07 / 2007

Transaction ID: SA11A1.99699

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Charles Needham, MD

Mailing Address 4811 Winged Foot Place

City Tucson State AZ Zip Code 85718

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

Name of Employer University Medical Center Occupation Neurosurgeon

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
06 / 05 / 2007

Transaction ID: SA11A1.99735

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Sara Nichols

Mailing Address 1824 Old Ranch Rd

City Los Angeles State CA Zip Code 90049

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 05 / 2007

Transaction ID: SA11A1.99752

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 81
	<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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Arthur Page</b>		Date of Receipt MM / DD / YYYY 06 / 20 / 2007
Mailing Address 1434 Triangle Dr.		<b>Transaction ID: SA11A1.99790</b>
City Houlton	State WI	Zip Code 54082
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 250.00	
Name of Employer Self-Employed	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Max Palevsky</b>		Date of Receipt MM / DD / YYYY 06 / 05 / 2007
Mailing Address 924 Westwood Blvd #700		<b>Transaction ID: SA11A1.99065</b>
City Los Angeles	State CA	Zip Code 90024
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 500.00	
Name of Employer Self-Employed	Occupation Private Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5500.00	

Full Name (Last, First, Middle Initial) <b>C. Max Palevsky</b>		Date of Receipt MM / DD / YYYY 06 / 11 / 2007
Mailing Address 924 Westwood Blvd #700		<b>Transaction ID: SA11A1.100457</b>
City Los Angeles	State CA	Zip Code 90024
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period -500.00	
Name of Employer Self-Employed	Occupation Private Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Reattribute: to Jodie Evans

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 81
	<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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Yolanda Parker

Mailing Address 3751 Crestway Dr.

City State Zip Code  
Los Angeles CA 90043-1701

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

Name of Employer Occupation  
KMS CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
06 / 05 / 2007

Transaction ID: SA11A1.99796

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Nick Passell

Mailing Address 524 Lincoln Ave.

City State Zip Code  
Eau Claire WI 54701

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

Name of Employer Occupation  
UW - Eau Claire Professor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2007

Transaction ID: SA11A1.99801

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Gregory Paul

Mailing Address 335 North Maple Drive

City State Zip Code  
Beverly Hills CA 90210

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

Name of Employer Occupation  
Castle Rock Entertainment Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
06 / 05 / 2007

Transaction ID: SA11A1.99807

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 81
	<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)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A.</b> Nancy Pitt		Date of Receipt M M / D D / Y Y Y Y 06 / 07 / 2007
Mailing Address 10 Calle de Amistad		Transaction ID: SA11A1.99843
City State Zip Code Tucson AZ 85716	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self-Employed Occupation Writer	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Sharai Pollock		Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2007
Mailing Address 131 County Rd W		Transaction ID: SA11A1.99854
City State Zip Code River Falls WI 54022-5402	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Wells Fargo Occupation Business Systems Consultant	Aggregate Year-to-Date ▼ 285.52	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Elizabeth Ann Reinartz		Date of Receipt M M / D D / Y Y Y Y 06 / 21 / 2007
Mailing Address 28 Heritage Circle Apt. 4		Transaction ID: SA11A1.99899
City State Zip Code Madison WI 53711	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 81
	<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	

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

NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Ira Resnick</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2007	
Mailing Address 15 W 63rd St., Apt 37A		<b>Transaction ID: SA11A1.99907</b>	
City State Zip Code New York NY 10023-7178	Amount of Each Receipt this Period 118.93		
FEC ID number of contributing federal political committee. C			
Name of Employer Motion Picture Art Gallery	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 368.93		

Full Name (Last, First, Middle Initial) <b>B. Beth Ross</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 28 / 2007	
Mailing Address 522 West Cedar Street		<b>Transaction ID: SA11A1.99956</b>	
City State Zip Code River Falls WI 54022	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Affiliated Emergency Veterinary Service	Occupation Veterinarian		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Mr John Sherry</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2007	
Mailing Address 3801 Canterbury Rd, Unit 605		<b>Transaction ID: SA11A1.100042</b>	
City State Zip Code Baltimore MD 21218	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	868.93
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 81
	<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	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Robert Slobe

Mailing Address 400 Slobe Ave

City State Zip Code  
Sacramento CA 95815

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

Name of Employer Occupation  
North Sacramento Land Company Business Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 28 / 2007

Transaction ID: SA11A1.100072

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Oliver Small

Mailing Address 5066 N 61st St

City State Zip Code  
Milwaukee WI 53218

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
MM / DD / YYYY  
06 / 21 / 2007

Transaction ID: SA11A1.100074

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Bernard Smith

Mailing Address 439 Mariposa Avenue Apt 1

City State Zip Code  
Sierra Madre CA 91024

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

Name of Employer Occupation  
Kotera Inc Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
06 / 19 / 2007

Transaction ID: SA11A1.100076

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 81
	<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	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Yzetta Smith

Mailing Address Route 1 Box 470

City State Zip Code  
West Hamlin WV 25571

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

Name of Employer Retina Consultants, PLLC Occupation Medical Transcriptionist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
MM / DD / YYYY  
06 / 25 / 2007

Transaction ID: SA11A1.100084

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Gail Spencer

Mailing Address 216 Burnett Avenue

City State Zip Code  
Lake Villa IL 60046

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
MM / DD / YYYY  
06 / 13 / 2007

Transaction ID: SA11A1.100100

Amount of Each Receipt this Period  
35.00

**C.** Full Name (Last, First, Middle Initial)  
Hope Stevens

Mailing Address PO Box 1510

City State Zip Code  
Helena MT 59624

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
06 / 27 / 2007

Transaction ID: SA11A1.100123

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	110.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 81
	<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	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

<b>A.</b> Full Name (Last, First, Middle Initial) Nan Stockholm Walden		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 7
Mailing Address PO Box 449		<b>Transaction ID:</b> SA11A1.100468
City State Zip Code Sahuarita AZ 85629	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Reattribute: from Richard Walden	
Name of Employer Occupation Green Valley Pecan Co Vice President	Aggregate Year-to-Date 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>B.</b> Full Name (Last, First, Middle Initial) Kenneth Strasma		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 7
Mailing Address 13 Coachlamp Ct.		<b>Transaction ID:</b> SA11A1.100132
City State Zip Code Silver Spring MD 20906	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Strategic Telemetry President	Aggregate Year-to-Date 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>C.</b> Full Name (Last, First, Middle Initial) David Tapscott		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 7
Mailing Address 608 Elmwood Avenue		<b>Transaction ID:</b> SA11A1.100161
City State Zip Code Uxbridge MA 01569	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Providence Community Health Center Physician	Aggregate Year-to-Date 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 81
	<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	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Elizabeth Tarr

Mailing Address 2236 Beachwood Dr

City State Zip Code  
Los Angeles CA 90068

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

Name of Employer Self-Employed Occupation  
Interior Design

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 05 / 2007

Transaction ID: SA11A1.100164

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Pam Tarr

Mailing Address 5516 Calhoun Ave

City State Zip Code  
Sherman Oaks CA 91401

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

Name of Employer Ace Entertainment Occupation  
Film Producer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
06 / 05 / 2007

Transaction ID: SA11A1.100165

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Irene Touzeau

Mailing Address 520 Clearwater Lake Drive

City State Zip Code  
Polk City FL 33868

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

Name of Employer Retired Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
06 / 04 / 2007

Transaction ID: SA11A1.100198

Amount of Each Receipt this Period  
45.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	545.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 81
	<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	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Irene Touzeau

Mailing Address 520 Clearwater Lake Drive

City State Zip Code  
Polk City FL 33868

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 445.00

Date of Receipt  
MM / DD / YYYY  
06 / 07 / 2007

Transaction ID: SA11A1.100195

Amount of Each Receipt this Period  
45.00

**B.** Full Name (Last, First, Middle Initial)  
Irene Touzeau

Mailing Address 520 Clearwater Lake Drive

City State Zip Code  
Polk City FL 33868

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 495.00

Date of Receipt  
MM / DD / YYYY  
06 / 11 / 2007

Transaction ID: SA11A1.100197

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Irene Touzeau

Mailing Address 520 Clearwater Lake Drive

City State Zip Code  
Polk City FL 33868

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 533.00

Date of Receipt  
MM / DD / YYYY  
06 / 25 / 2007

Transaction ID: SA11A1.100196

Amount of Each Receipt this Period  
38.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	133.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 81
	<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	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
John Venturini

Mailing Address 5554 Riverton Avenue, Apt 4

City State Zip Code  
North Hollywood CA 91601-2817

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

Name of Employer Self-Employed Occupation  
Writer/Script Supervisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
06 / 05 / 2007

Transaction ID: SA11A1.100227

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Richard Walden

Mailing Address PO Box 449

City State Zip Code  
Sahuarita AZ 85629

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

Name of Employer Farmers Investment Co. Occupation  
President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
06 / 27 / 2007

Transaction ID: SA11A1.100241

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Richard Walden

Mailing Address PO Box 449

City State Zip Code  
Sahuarita AZ 85629

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

Name of Employer Farmers Investment Co. Occupation  
President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 28 / 2007

Transaction ID: SA11A1.100467

Amount of Each Receipt this Period  
-250.00

Reattribute: to Jan Stockholm Walden

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 81
	<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	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Janice Watten

Mailing Address 800 Third St. Apt B16

City State Zip Code  
Carlton MN 55718

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

Name of Employer Best Efforts to Obtain Info  
Occupation Best Efforts to Obtain Info

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 21 / 2007

Transaction ID: SA11A1.100253

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Rita Weinstein

Mailing Address 2203 Northwest 59th Street, Apt. 5

City State Zip Code  
Seattle WA 98107-3150

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

Name of Employer Self-Employed  
Occupation Writer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 19 / 2007

Transaction ID: SA11A1.100261

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Adam Weiss

Mailing Address 1625 Glendon Avenue #5D #5D

City State Zip Code  
Los Angeles CA 90024

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

Name of Employer Cornerstone OnDemand, Inc.  
Occupation General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 05 / 2007

Transaction ID: SA11A1.100264

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	375.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 81
	<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	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
David Wolf

Mailing Address 812 North Foothill Road

City State Zip Code  
Beverly Hills CA 90210

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

Name of Employer Self-Employed Occupation  
Screenwriter

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 05 / 2007

Transaction ID: SA11A1.100308

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Janice Wolf

Mailing Address 812 North Foothill Road

City State Zip Code  
Beverly Hills CA 90210

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

Name of Employer Self-Employed Occupation  
Writer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 05 / 2007

Transaction ID: SA11A1.100310

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Rae Wyman

Mailing Address 3069 Crest Road

City State Zip Code  
Rancho Palos Verde CA 90275

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

Name of Employer Retired Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 05 / 2007

Transaction ID: SA11A1.100330

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	52995.05

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 43 / 81	
	(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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Park Bank

Mailing Address 1801 Greenway Cross

City State Zip Code  
Madison WI 53708

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
716.17

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	9	/	2	0	0	7

Transaction ID: SA17.100488

Amount of Each Receipt this Period  
121.63

Interest Income

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	121.63
<b>TOTAL</b> This Period (last page this line number only) .....	▶	121.63

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		<b>Transaction ID:</b> SB21B.100380 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7
Mailing Address 200 Vesey Street		Amount of Each Disbursement this Period 5.95
City New York State NY Zip Code 10285	Purpose of Disbursement Banking Fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		<b>Transaction ID:</b> SB21B.100383 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 7
Mailing Address 200 Vesey Street		Amount of Each Disbursement this Period 272.43
City New York State NY Zip Code 10285	Purpose of Disbursement Banking Fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Best Buy</b>		<b>Transaction ID:</b> SB21B.100408 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address P.O. Box 9312		Amount of Each Disbursement this Period 242.64
City Minneapolis State MN Zip Code 55440-9312	Purpose of Disbursement Office Equipment Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	521.02
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Bloggerpower.org</b>		<b>Transaction ID:</b> SB21B.100386 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 7
Mailing Address 1020 Masonic Ave		Amount of Each Disbursement this Period 1500.00
City San Francisco State CA Zip Code 94117	Purpose of Disbursement Booth Rental Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Beth Broderick</b>		<b>Transaction ID:</b> SB21B.100447 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 7
Mailing Address 1935 Palmerston		Amount of Each Disbursement this Period 2350.00
City Los Angeles State CA Zip Code 90027	Purpose of Disbursement In-kind - Event Expense: Catering Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Cole Leystra</b>		<b>Transaction ID:</b> SB21B.100418 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 7
Mailing Address 2898 Mickelson Pkwy, #204		Amount of Each Disbursement this Period 793.06
City Fitchburg State WI Zip Code 53711	Purpose of Disbursement Payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4643.06</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Cole Leystra</b>		<b>Transaction ID:</b> SB21B.100428 <b>Date of Disbursement</b> MM / DD / YYYY 06 / 28 / 2007
Mailing Address 2898 Mickelson Pkwy, #204		Amount of Each Disbursement this Period 813.60
City Fitchburg State WI Zip Code 53711	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Comcast</b>		<b>Transaction ID:</b> SB21B.100406 <b>Date of Disbursement</b> MM / DD / YYYY 06 / 04 / 2007
Mailing Address PO Box 3005		Amount of Each Disbursement this Period 49.95
City Southeastern State PA Zip Code 19398-3005	Category/ Type	
Purpose of Disbursement Internet Service		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Joe Croyle</b>		<b>Transaction ID:</b> SB21B.100445 <b>Date of Disbursement</b> MM / DD / YYYY 06 / 01 / 2007
Mailing Address 3202 Dos Palos Drive		Amount of Each Disbursement this Period 1000.00
City Los Angeles State CA Zip Code 90068	Category/ Type	
Purpose of Disbursement In-kind - Event Expense: Music		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>1863.55</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. David Kreisman</b>		<b>Transaction ID:</b> SB21B.100420 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 7
Mailing Address 511 W Main St Apt 303		Amount of Each Disbursement this Period 760.80
City Madison State WI Zip Code 53703	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. David Kreisman</b>		<b>Transaction ID:</b> SB21B.100423 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 7
Mailing Address 511 W Main St Apt 303		Amount of Each Disbursement this Period 770.55
City Madison State WI Zip Code 53703	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Department of Employment Services</b>		<b>Transaction ID:</b> SB21B.100372 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 7
Mailing Address 500 C St. NW Room 501		Amount of Each Disbursement this Period 0.92
City Washington State DC Zip Code 20001	Purpose of Disbursement Administrative Assessment Tax Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1532.27
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Department of Employment Services</b>		<b>Transaction ID:</b> SB21B.100438 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 7
Mailing Address 500 C St. NW Room 501		Amount of Each Disbursement this Period 12.33
City Washington State DC Zip Code 20001	Category/ Type	
Purpose of Disbursement Unemployment Tax Withheld		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Department of Employment Services</b>		<b>Transaction ID:</b> SB21B.100373 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 7
Mailing Address 500 C St. NW Room 501		Amount of Each Disbursement this Period 0.91
City Washington State DC Zip Code 20001	Category/ Type	
Purpose of Disbursement Administrative Assessment Tax		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Department of Employment Services</b>		<b>Transaction ID:</b> SB21B.100440 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 7
Mailing Address 500 C St. NW Room 501		Amount of Each Disbursement this Period 12.34
City Washington State DC Zip Code 20001	Category/ Type	
Purpose of Disbursement Unemployment Tax Withheld		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	25.58
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Department of Workforce Development</b>		<b>Transaction ID:</b> SB21B.100442 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 7
Mailing Address 201 E. Washington Avenue		Amount of Each Disbursement this Period 16.21
City Madison State WI Zip Code 53702	Category/ Type	
Purpose of Disbursement Unemployment Taxes Withheld		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Emily Dreke</b>		<b>Transaction ID:</b> SB21B.98509 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 1 / 2 0 0 7
Mailing Address 711 13th Street NE		Amount of Each Disbursement this Period 84.62
City Washington State DC Zip Code 20002	Category/ Type	
Purpose of Disbursement Reimbursement: See Memo Entries & Text		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Postmaster</b>		<b>Transaction ID:</b> SB21B.98509.1 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7
Mailing Address 3902 Milwaukee Street		Amount of Each Disbursement this Period 29.85  <b>[MEMO ITEM]</b>
City Madison State WI Zip Code 53714	Category/ Type	
Purpose of Disbursement Administrative Expense: Postage		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	100.83
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Postmaster</b>		Transaction ID: SB21B.98509.2 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 3902 Milwaukee Street		Amount of Each Disbursement this Period 19.60
City Madison State WI Zip Code 53714	[MEMO ITEM]	
Purpose of Disbursement Administrative Expense: Postage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Postmaster</b>		Transaction ID: SB21B.98509.3 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 7
Mailing Address 3902 Milwaukee Street		Amount of Each Disbursement this Period 16.25
City Madison State WI Zip Code 53714	[MEMO ITEM]	
Purpose of Disbursement Administrative Expense: Postage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Emily Dreke</b>		Transaction ID: SB21B.100419 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 7
Mailing Address 711 13th Street NE		Amount of Each Disbursement this Period 402.86
City Washington State DC Zip Code 20002	[MEMO ITEM]	
Purpose of Disbursement Payroll		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	402.86
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

<p><b>A. Emily Dreke</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 711 13th Street NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p><b>Transaction ID:</b> SB21B.100424</p> <p><b>Date of Disbursement</b></p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="402.86"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p><b>B. Frontier</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 92833</p> <p>City Rochester State NY Zip Code 14892</p> <p>Purpose of Disbursement Phone Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p><b>Transaction ID:</b> SB21B.100432</p> <p><b>Date of Disbursement</b></p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="35.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p><b>C. Larry Gellman</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 4405 North Black Rock Drive</p> <p>City Tucson State AZ Zip Code 85750</p> <p>Purpose of Disbursement In-kind - Event Expense: Food &amp; Beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p><b>Transaction ID:</b> SB21B.100449</p> <p><b>Date of Disbursement</b></p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="380.00"/></p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="817.86"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. George Aldrich</b>		<b>Transaction ID:</b> SB21B.100417 <b>Date of Disbursement</b> MM / DD / YYYY 06 / 14 / 2007
Mailing Address 538 N 51st St		Amount of Each Disbursement this Period 1457.62
City Milwaukee State WI Zip Code 53208	Purpose of Disbursement Payroll	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. George Aldrich</b>		<b>Transaction ID:</b> SB21B.100427 <b>Date of Disbursement</b> MM / DD / YYYY 06 / 28 / 2007
Mailing Address 538 N 51st St		Amount of Each Disbursement this Period 1457.64
City Milwaukee State WI Zip Code 53208	Purpose of Disbursement Payroll	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Gordon Flesch Co., Inc</b>		<b>Transaction ID:</b> SB21B.100394 <b>Date of Disbursement</b> MM / DD / YYYY 06 / 11 / 2007
Mailing Address PO Box 992		Amount of Each Disbursement this Period 83.94
City Madison State WI Zip Code 53701	Purpose of Disbursement Copier Rental	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2999.20</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Greenway Office Center LLC</b>		<b>Transaction ID:</b> SB21B.100409 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 7
Mailing Address 8401 Greenway Blvd		Amount of Each Disbursement this Period 583.18
City Middleton State WI Zip Code 53562	Purpose of Disbursement Office Rent Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Joan Kaye Cauthorn</b>		<b>Transaction ID:</b> SB21B.100451 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 7
Mailing Address 30 N Camino Espanol		Amount of Each Disbursement this Period 2237.20
City Tucson State AZ Zip Code 85716	Purpose of Disbursement In-kind - Event Expense: Catering Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Landmark Building</b>		<b>Transaction ID:</b> SB21B.100411 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 7
Mailing Address 316 N Milwaukee St.		Amount of Each Disbursement this Period 500.00
City Milwaukee State WI Zip Code 53202	Purpose of Disbursement Office Rent Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3320.38
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Lee Arnold Productions</b>		<b>Transaction ID:</b> SB21B.100388 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7
Mailing Address 8340 North Links Way		Amount of Each Disbursement this Period 835.00
City Milwaukee State WI Zip Code 53217	Purpose of Disbursement Bumper Sticker Production Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Lenee Kruse</b>		<b>Transaction ID:</b> SB21B.98514 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7
Mailing Address 320 Constitution Ave NE Apt 14		Amount of Each Disbursement this Period 346.32
City Washington State DC Zip Code 20002	Purpose of Disbursement Reimbursement: See Memo Text Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Lenee Kruse</b>		<b>Transaction ID:</b> SB21B.100416 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 7
Mailing Address 320 Constitution Ave NE Apt 14		Amount of Each Disbursement this Period 1143.69
City Washington State DC Zip Code 20002	Purpose of Disbursement Payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2325.01</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Lenee Kruse</b>		<b>Transaction ID:</b> SB21B.100425 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 7	
Mailing Address 320 Constitution Ave NE Apt 14		Amount of Each Disbursement this Period 1165.01	
City Washington State DC Zip Code 20002	Purpose of Disbursement Payroll	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. M&amp;T Bank</b>		<b>Transaction ID:</b> SB21B.100381 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7	
Mailing Address 25 S Charles St		Amount of Each Disbursement this Period 138.15	
City Baltimore State MD Zip Code 21201	Purpose of Disbursement Banking Fee	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. M&amp;T Bank</b>		<b>Transaction ID:</b> SB21B.100384 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address 25 S Charles St		Amount of Each Disbursement this Period 39.79	
City Baltimore State MD Zip Code 21201	Purpose of Disbursement Banking Fee	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1342.95
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Mal Warwick and Associates</b>		<b>Transaction ID:</b> SB21B.100395 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 8 / 2 0 0 7
Mailing Address 2550 Ninth Street, Suite 103		Amount of Each Disbursement this Period 21549.54
City Berkeley State CA Zip Code 94710-2516		
Purpose of Disbursement Direct Mail		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Mal Warwick and Associates</b>		<b>Transaction ID:</b> SB21B.100396 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 7
Mailing Address 2550 Ninth Street, Suite 103		Amount of Each Disbursement this Period 4000.00
City Berkeley State CA Zip Code 94710-2516		
Purpose of Disbursement Retainer - Fundraising Consulting		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Jennifer Marsden</b>		<b>Transaction ID:</b> SB21B.100491 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 7
Mailing Address PO Box 1846		Amount of Each Disbursement this Period 1221.30
City Cave Junction State OR Zip Code 97523		
Purpose of Disbursement In-kind - Event Expense: Invitations		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	26770.84
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

<b>A. Steven Marsden</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 1846 City Cave Junction State OR Zip Code 97523-1846 Purpose of Disbursement In-kind - Event Expense: Beverages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB21B.100493</b> Date of Disbursement 06 / 02 / 2007 Amount of Each Disbursement this Period 469.62 Category/Type
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<b>B. Merkle Response Services</b> Full Name (Last, First, Middle Initial) Mailing Address 13331 Pennsylvania Ave City Hagerstown State MD Zip Code 21742 Purpose of Disbursement Direct Mail Processing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB21B.100397</b> Date of Disbursement 06 / 25 / 2007 Amount of Each Disbursement this Period 1856.42 Category/Type
--	--	--

<b>C. Office of Tax and Revenue</b> Full Name (Last, First, Middle Initial) Mailing Address 941 North Capitol Street, NE City Washington State DC Zip Code 20002 Purpose of Disbursement Income Tax Withheld Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB21B.100401</b> Date of Disbursement 06 / 14 / 2007 Amount of Each Disbursement this Period 90.50 Category/Type
--	--	--

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2416.54</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Office of Tax and Revenue</b>		<b>Transaction ID:</b> SB21B.100403 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 7
Mailing Address 941 North Capitol Street, NE		Amount of Each Disbursement this Period 93.50
City Washington State DC Zip Code 20002		
Purpose of Disbursement Income Tax Withheld Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Park Bank</b>		<b>Transaction ID:</b> SB21B.98553 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 7
Mailing Address 1801 Greenway Cross		Amount of Each Disbursement this Period 6974.15
City Madison State WI Zip Code 53708		
Purpose of Disbursement Credit Card Payment: See Memo Entries Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. US Airways</b>		<b>Transaction ID:</b> SB21B.98553.0 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 7
Mailing Address 2345 Crystal Drive		Amount of Each Disbursement this Period 70.40  <b>[MEMO ITEM]</b>
City Arlington State VA Zip Code 22227		
Purpose of Disbursement Travel Expense: Airline Ticket Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7067.65
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Crowne Plaza

Mailing Address 13051 Bell Tower Dr

City Fort Myers State FL Zip Code 33907

Purpose of Disbursement  
Travel Expense: Lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB21B.98553.7

Date of Disbursement

/   /

Amount of Each Disbursement this Period

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
Thrifty Car Rental

Mailing Address P.O. Box 35250

City Tulsa State OK Zip Code 74153

Purpose of Disbursement  
Travel Expense: Rental Car

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB21B.98553.8

Date of Disbursement

/   /

Amount of Each Disbursement this Period

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
Charlie Palmer Steak

Mailing Address 101 Constitution Ave NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Event Expense: Food and Beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB21B.98553.10

Date of Disbursement

/   /

Amount of Each Disbursement this Period

[MEMO ITEM]

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

<p><b>A. Staples</b></p> <p>Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address P.O. Box 469</p> <p>City Coppel State TX Zip Code 75019</p> <p>Purpose of Disbursement Administrative Expense: Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: SB21B.98553.11</p> <p>Date of Disbursement 04 / 20 / 2007</p> <p>Amount of Each Disbursement this Period 71.82</p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p><b>B. United Airlines</b></p> <p>Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address P.O. Box 66100</p> <p>City Chicago State IL Zip Code 60666</p> <p>Purpose of Disbursement Travel Expense: Airline Tickets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: SB21B.98553.12</p> <p>Date of Disbursement 04 / 27 / 2007</p> <p>Amount of Each Disbursement this Period 878.00</p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p><b>C. Staples</b></p> <p>Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address P.O. Box 469</p> <p>City Coppel State TX Zip Code 75019</p> <p>Purpose of Disbursement Administrative Expense: Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Transaction ID: SB21B.98553.13</p> <p>Date of Disbursement 04 / 29 / 2007</p> <p>Amount of Each Disbursement this Period 70.00</p> <p>[MEMO ITEM]</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>0.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Sammy Roumanian Steak House</b>		Transaction ID: SB21B.98553.14 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 157 Chrystie St		Amount of Each Disbursement this Period 422.00
City New York State NY Zip Code 10002	[MEMO ITEM]	
Purpose of Disbursement Event Expense: Food and Beverage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Le Parker Meridien</b>		Transaction ID: SB21B.98553.18 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7
Mailing Address 119 West 56th St.		Amount of Each Disbursement this Period 1179.18
City New York State NY Zip Code 10019	[MEMO ITEM]	
Purpose of Disbursement Travel Expense: Lodging		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. US Airways</b>		Transaction ID: SB21B.98553.19 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7
Mailing Address 2345 Crystal Drive		Amount of Each Disbursement this Period 727.59
City Arlington State VA Zip Code 22227	[MEMO ITEM]	
Purpose of Disbursement Travel Expense: Airline Tickets		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Carey Limousine</b>		<b>Transaction ID:</b> SB21B.98553.20 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 7
Mailing Address 6023 Bristol Pkwy		Amount of Each Disbursement this Period 543.05
City Culver City State CA Zip Code 90230	[MEMO ITEM]	
Purpose of Disbursement Travel Expense: Car Service Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Midwest Express</b>		<b>Transaction ID:</b> SB21B.98553.21 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address 6744 South Howell Avenue		Amount of Each Disbursement this Period 363.53
City Oak Creek State WI Zip Code 53154	[MEMO ITEM]	
Purpose of Disbursement Travel Expense: Airline Tickets Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>		<b>Transaction ID:</b> SB21B.98553.22 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 3 / 2 0 0 7
Mailing Address 4255 Amon Carter Blvd. MD 2400		Amount of Each Disbursement this Period 318.80
City Fort Worth State TX Zip Code 76155	[MEMO ITEM]	
Purpose of Disbursement Travel Expense: Airline Tickets Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Transaction ID: SB21B.98553.23 Date of Disbursement MM / DD / YYYY 05 / 13 / 2007
Mailing Address P.O. Box 469		Amount of Each Disbursement this Period 36.68
City Coppel State TX Zip Code 75019	Category/Type	
Purpose of Disbursement Administrative Expense: Office Supplies		
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Bistro Bis</b>		Transaction ID: SB21B.98553.24 Date of Disbursement MM / DD / YYYY 05 / 13 / 2007
Mailing Address 15 E St., NW		Amount of Each Disbursement this Period 74.15
City Washington State DC Zip Code 20001	Category/Type	
Purpose of Disbursement Meeting Expense: Food and Beverage		
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Park Bank</b>		Transaction ID: SB21B.100382 Date of Disbursement MM / DD / YYYY 06 / 06 / 2007
Mailing Address 1801 Greenway Cross		Amount of Each Disbursement this Period 67.95
City Madison State WI Zip Code 53708	Category/Type	
Purpose of Disbursement Banking Fee		
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	67.95
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Park Bank</b>		<b>Transaction ID:</b> SB21B.100385 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 1 / 2 0 0 7
Mailing Address 1801 Greenway Cross		Amount of Each Disbursement this Period 847.89
City Madison State WI Zip Code 53708	Purpose of Disbursement Banking Fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Park Bank</b>		<b>Transaction ID:</b> SB21B.100370 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 7
Mailing Address 1801 Greenway Cross		Amount of Each Disbursement this Period 2445.90
City Madison State WI Zip Code 53708	Purpose of Disbursement 941 Deposit Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Park Bank</b>		<b>Transaction ID:</b> SB21B.100439 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 7
Mailing Address 1801 Greenway Cross		Amount of Each Disbursement this Period 3.66
City Madison State WI Zip Code 53708	Purpose of Disbursement Unemployment Tax Withheld Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3297.45
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Park Bank</b>		<b>Transaction ID:</b> SB21B.100371 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 7
Mailing Address 1801 Greenway Cross		Amount of Each Disbursement this Period 2494.82
City Madison State WI Zip Code 53708	Purpose of Disbursement 941 Deposit Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Park Bank</b>		<b>Transaction ID:</b> SB21B.100441 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 7
Mailing Address 1801 Greenway Cross		Amount of Each Disbursement this Period 3.65
City Madison State WI Zip Code 53708	Purpose of Disbursement Unemployment Tax Withheld Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Paula Zellner</b>		<b>Transaction ID:</b> SB21B.100415 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 7
Mailing Address W3034 Twin Creek Rd		Amount of Each Disbursement this Period 845.53
City Porterfield State WI Zip Code 54159	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3344.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Paula Zellner

Mailing Address W3034 Twin Creek Rd

City Porterfield State WI Zip Code 54159

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** SB21B.100426  
**Date of Disbursement:** 06 / 28 / 2007

Amount of Each Disbursement this Period: 870.30

Category/Type

**B.** Full Name (Last, First, Middle Initial)  
Pepco

Mailing Address 701 Ninth St., NW

City Washington State DC Zip Code 20068

Purpose of Disbursement Utilities Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** SB21B.100443  
**Date of Disbursement:** 06 / 04 / 2007

Amount of Each Disbursement this Period: 99.33

Category/Type

**C.** Full Name (Last, First, Middle Initial)  
Postmaster

Mailing Address 3902 Milwaukee Street

City Madison State WI Zip Code 53714

Purpose of Disbursement Administrative Expense: Postage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** SB21B.100374  
**Date of Disbursement:** 06 / 01 / 2007

Amount of Each Disbursement this Period: 201.00

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 1170.63

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Postmaster</b>		<b>Transaction ID:</b> SB21B.100375 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 7	
Mailing Address 3902 Milwaukee Street		Amount of Each Disbursement this Period 13.95	
City Madison State WI Zip Code 53714	Purpose of Disbursement Administrative Expense: Postage Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Postmaster</b>		<b>Transaction ID:</b> SB21B.100376 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 7	
Mailing Address 3902 Milwaukee Street		Amount of Each Disbursement this Period 104.00	
City Madison State WI Zip Code 53714	Purpose of Disbursement Administrative Expense: Postage Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Postmaster</b>		<b>Transaction ID:</b> SB21B.100377 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 8 / 2 0 0 7	
Mailing Address 3902 Milwaukee Street		Amount of Each Disbursement this Period 134.00	
City Madison State WI Zip Code 53714	Purpose of Disbursement Administrative Expense: Postage Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	251.95
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Postmaster</b>		<b>Transaction ID:</b> SB21B.100378 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 7
Mailing Address 3902 Milwaukee Street		Amount of Each Disbursement this Period 17.39
City Madison State WI Zip Code 53714	Purpose of Disbursement Administrative Expense: Postage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Postmaster</b>		<b>Transaction ID:</b> SB21B.100379 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 7
Mailing Address 3902 Milwaukee Street		Amount of Each Disbursement this Period 16.25
City Madison State WI Zip Code 53714	Purpose of Disbursement Administrative Expense: Postage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Potomac Development, Corp</b>		<b>Transaction ID:</b> SB21B.100410 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 7
Mailing Address 900 2nd St, NE Suite 114		Amount of Each Disbursement this Period 2217.68
City Washington State DC Zip Code 20002	Purpose of Disbursement Office Rent	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2251.32
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Quickbooks Payroll Service</b>		<b>Transaction ID:</b> SB21B.100429
Mailing Address 2632 Marine Way		Date of Disbursement MM / DD / YYYY 06 / 14 / 2007
City Mountain View	State CA	Amount of Each Disbursement this Period 19.25
Zip Code 94043		
Purpose of Disbursement Payroll Processing Fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Quickbooks Payroll Service</b>		<b>Transaction ID:</b> SB21B.100430
Mailing Address 2632 Marine Way		Date of Disbursement MM / DD / YYYY 06 / 28 / 2007
City Mountain View	State CA	Amount of Each Disbursement this Period 19.25
Zip Code 94043		
Purpose of Disbursement Payroll Processing Fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Sharegroup, Inc</b>		<b>Transaction ID:</b> SB21B.100437
Mailing Address PO Box 55183		Date of Disbursement MM / DD / YYYY 06 / 04 / 2007
City Boston	State MA	Amount of Each Disbursement this Period 4245.00
Zip Code 02205-5183		
Purpose of Disbursement Fundraising Expense: Telemarketing Fees		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4283.50</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Sharegroup, Inc</b>		<b>Transaction ID:</b> SB21B.100400 Date of Disbursement 06 / 11 / 2007
Mailing Address PO Box 55183		Amount of Each Disbursement this Period 725.50
City Boston State MA Zip Code 02205-5183	Purpose of Disbursement Fundraising Expense: Telemarketing Fees Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		<b>Transaction ID:</b> SB21B.100413 Date of Disbursement 06 / 29 / 2007
Mailing Address P.O. Box 469		Amount of Each Disbursement this Period 147.67
City Coppell State TX Zip Code 75019	Purpose of Disbursement Administrative Expense: Office Supplies Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) <b>C. StreamGuys, Inc</b>		<b>Transaction ID:</b> SB21B.100414 Date of Disbursement 06 / 18 / 2007
Mailing Address PO Box 828		Amount of Each Disbursement this Period 290.00
City Arcata State CA Zip Code 95518	Purpose of Disbursement Online Video Storage Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1163.17
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. TDS Telecom</b>		<b>Transaction ID:</b> SB21B.100434
Mailing Address PO Box 620070		Date of Disbursement MM / DD / YYYY 06 / 18 / 2007
City Middleton	State WI	Zip Code 53562
Purpose of Disbursement Phone Expense	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 168.03	

Full Name (Last, First, Middle Initial) <b>B. The Valettes</b>		<b>Transaction ID:</b> SB21B.100399
Mailing Address PO Box 1306		Date of Disbursement MM / DD / YYYY 06 / 04 / 2007
City Hermosa Beach	State CA	Zip Code 90254
Purpose of Disbursement Event Expense: Parking Fees	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 748.00	

Full Name (Last, First, Middle Initial) <b>C. Time Warner Cable</b>		<b>Transaction ID:</b> SB21B.100389
Mailing Address PO Box 3237		Date of Disbursement MM / DD / YYYY 06 / 18 / 2007
City Milwaukee	State WI	Zip Code 53201
Purpose of Disbursement Cable Service	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Amount of Each Disbursement this Period 40.00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>956.03</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Trevor Miller</b>		<b>Transaction ID:</b> SB21B.100421 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 7
Mailing Address W205S8335 Pasadena Dr		Amount of Each Disbursement this Period 1232.30
City Muskego State WI Zip Code 53150	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Trevor Miller</b>		<b>Transaction ID:</b> SB21B.98531 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 7
Mailing Address W205S8335 Pasadena Dr		Amount of Each Disbursement this Period 1377.57
City Muskego State WI Zip Code 53150	Purpose of Disbursement Reimbursement: See Memo Entries & Text Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Cingular Wireless</b>		<b>Transaction ID:</b> SB21B.98531.1 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 7
Mailing Address 3604 S. Mooreland Road		Amount of Each Disbursement this Period 100.00
City New Berlin State WI Zip Code 53151	Purpose of Disbursement Cell Phone Expense Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2609.87
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Hilton Resorts</b>		Transaction ID: SB21B.98531.4 Date of Disbursement 06 / 15 / 2007
Mailing Address 100 North Atlantic Avenue		Amount of Each Disbursement this Period 714.76
City Daytona Beach	State FL Zip Code 32118	
Purpose of Disbursement Travel Expense: Lodging		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Enterprise Rent-A-Car</b>		Transaction ID: SB21B.98531.7 Date of Disbursement 06 / 17 / 2007
Mailing Address 600 Corporate Park Drive		Amount of Each Disbursement this Period 211.15
City St. Louis	State MO Zip Code 63105	
Purpose of Disbursement Travel Expense: Rental Car		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Cingular Wireless</b>		Transaction ID: SB21B.98531.12 Date of Disbursement 06 / 19 / 2007
Mailing Address 3604 S. Mooreland Road		Amount of Each Disbursement this Period 211.29
City New Berlin	State WI Zip Code 53151	
Purpose of Disbursement Cell Phone Expense		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Trevor Miller</b>		<b>Transaction ID:</b> SB21B.100422 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 7
Mailing Address W205S8335 Pasadena Dr		Amount of Each Disbursement this Period 1256.88
City Muskego State WI Zip Code 53150	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>		<b>Transaction ID:</b> SB21B.100431 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7
Mailing Address PO Box 17577		Amount of Each Disbursement this Period 125.04
City Baltimore State MD Zip Code 21297-0513	Category/ Type	
Purpose of Disbursement Phone Expense		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Verizon</b>		<b>Transaction ID:</b> SB21B.100433 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 1 / 2 0 0 7
Mailing Address PO Box 17577		Amount of Each Disbursement this Period 67.56
City Baltimore State MD Zip Code 21297-0513	Category/ Type	
Purpose of Disbursement Phone Expense		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1449.48
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		<b>Transaction ID:</b> SB21B.100390
Mailing Address PO Box 17464		Date of Disbursement MM / DD / YYYY 06 / 04 / 2007
City Baltimore	State MD	Zip Code 21297
Purpose of Disbursement Cell Phone Expense		Amount of Each Disbursement this Period 87.30
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		<b>Transaction ID:</b> SB21B.100391
Mailing Address PO Box 17464		Date of Disbursement MM / DD / YYYY 06 / 25 / 2007
City Baltimore	State MD	Zip Code 21297
Purpose of Disbursement Cell Phone Expense		Amount of Each Disbursement this Period 85.11
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Voicetext Interactive</b>		<b>Transaction ID:</b> SB21B.100392
Mailing Address 211 East 7th Street, 12th Floor		Date of Disbursement MM / DD / YYYY 06 / 11 / 2007
City Austin	State TX	Zip Code 78701
Purpose of Disbursement Conference Call Fees		Amount of Each Disbursement this Period 8.82
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>181.23</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Voicetext Interactive</b>		<b>Transaction ID:</b> SB21B.100393 Date of Disbursement MM / DD / YYYY 06 / 18 / 2007
Mailing Address 211 East 7th Street, 12th Floor		Amount of Each Disbursement this Period <b>39.41</b>
City Austin	State TX Zip Code 78701	
Purpose of Disbursement Conference Call Fees		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Wisconsin Department of Revenue</b>		<b>Transaction ID:</b> SB21B.100402 Date of Disbursement MM / DD / YYYY 06 / 14 / 2007
Mailing Address PO Box 8902		Amount of Each Disbursement this Period <b>395.84</b>
City Madison	State WI Zip Code 53708	
Purpose of Disbursement Income Tax Withheld		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Wisconsin Department of Revenue</b>		<b>Transaction ID:</b> SB21B.100404 Date of Disbursement MM / DD / YYYY 06 / 28 / 2007
Mailing Address PO Box 8902		Amount of Each Disbursement this Period <b>404.39</b>
City Madison	State WI Zip Code 53708	
Purpose of Disbursement Income Tax Withheld		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>839.64</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. WPS Health Insurance</b>		Transaction ID: SB21B.100405	
Mailing Address 1717 W. Broadway P.O. Box 8190		Date of Disbursement 06 / 04 / 2007	
City Madison	State WI	Zip Code 53708	Amount of Each Disbursement this Period 1162.41
Purpose of Disbursement Insurance Premiums		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1162.41</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>79178.23</b>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Friends of Dick Durbin Committee</b>		<b>Transaction ID: SB23.100485</b>																					
Mailing Address PO Box 1949		Date of Disbursement																					
City Springfield State IL Zip Code 62705		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		2	7		2	0	0	7														
Purpose of Disbursement Contribution to Campaign Committee		Amount of Each Disbursement this Period																					
Candidate Name Richard J Durbin		<table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>		2500.00																			
2500.00																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2008																					
State: IL District: 00		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

Full Name (Last, First, Middle Initial) <b>B. John Bocchieri for Congress</b>		<b>Transaction ID: SB23.100482</b>																					
Mailing Address PO Box 3016		Date of Disbursement																					
City Alliance State OH Zip Code 44601		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		2	0		2	0	0	7														
Purpose of Disbursement Contribution to Campaign Committee		Amount of Each Disbursement this Period																					
Candidate Name John A Bocchieri		<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>		1000.00																			
1000.00																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2008																					
State: OH District: 16		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<b>3500.00</b>

Image# 27930981885

Form/Schedule: **SB21B** All disbursements documented as Line 21b, Federal Operating Expenditures, are in support of the committee itself and did not serve as contributions to any other candidate, federal or non-federal.  
Transaction ID: **SB21B.100380**

Form/Schedule: **SB21B** This disbursement includes and unitemized expense for \$18.92 to FedEx for shipping expenses.  
Transaction ID: **SB21B.98509**

\*\*\*\*\*

Image# 27930981886

Form/Schedule: **SB21B** This disbursement includes \$346.32 in unitemized expenses including \$60 to Allstar Cab for taxi fare, \$60 to Sunrise Taxi for taxi fare, \$20 to Fiesta Cab for taxi fare, \$20.32 to Starbucks for food and beverage, \$41 to Yellow Cab for taxi fare, \$35 to United Independent Taxi for taxi fare, \$35 to Beverly Hills Cab for taxi fare, \$35 to Independent Taxi Company for taxi fare, and \$40 in tips.

Form/Schedule: **SB21B** This disbursement includes \$629.84 in unitemized expenses including \$158.51 to the Bubble Room for food and beverage, \$4.12 to Chick-Fil-A for food and beverage, \$60.58 to Steak & Ale for food and beverage, \$114.88 to the Blue Pointe Oyster Bar for food and beverage, \$49.08 to Lazy Flamingo for food and beverage, \$29.03 to HMS Host for food and beverage, \$16.58 to Waffle House for food and beverage, \$22 to Twist for food and beverage, \$3.03 to Starbucks for food and beverage, and \$172.03 to Carey Limousine for car service.

\*\*\*\*\*



Image# 27930981887

Form/Schedule: **SB21B** This disbursement includes \$140.37 in unitemized expenses including \$12 to Milwaukee Magazine for periodicals,  
Transaction ID: **SB21B.98531** \$12.75 to Kuletos Restaurant for food, \$32 to General Mitchell Airport for parking, \$5 in tollway fees, \$5.40  
to Starbucks for beverages, \$10.23 to Alliance for gas, \$46.06 to Mission Bar & Grill for food and beverage,  
\$4.97 to McDonalds for food and beverage, and \$11.96 to TGI Fridays for food and beverage.

\*\*\*\*\*