

**FEC
FORM 3X**

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

RECEIVED
FEC MAIL CENTER

2007 JUL 31 AM 9:35

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

ELEVENTH CONGRESSIONAL DISTRICT

DEMOCRATIC COMMITTEE OF VIRGINIA

ADDRESS (number and street)

10106 COMMUNITY LANE



Check if different
than previously
reported. (ACC)

FAIRFAX STATION

VA

22039

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00267385

3. IS THIS
REPORT



NEW
(N)

OR



AMENDED
(A)

4. TYPE OF REPORT
(Choose One)

(a) Quarterly Reports:



April 15
Quarterly Report (Q1)



July 15
Quarterly Report (Q2)



October 15
Quarterly Report (Q3)



January 31
Year-End Report (YE)



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



Termination Report
(TER)

(b) Monthly
Report
Due On:



Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)



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



Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)



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



Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM / DD /

YY

in the

State of

(d) 30-Day
POST-Election
Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD /

YY

in the
State of

5. Covering Period

07 / 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

SHARON E STARK

Signature of Treasurer

[Signature]

Date

07 / 27 /

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.

Office
Use
Only

FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Eleventh Congressional District Democratic
Committee of VA

Report Covering the Period:

From:

01 / 01 / 2007

To:

06 / 30 / 2007

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1,	2007	408.17
(b) Cash on Hand at Beginning of Reporting Period.....	408.17	
(c) Total Receipts (from Line 19)	21,561.3	21,561.3
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	25,643.0	25,643.0
7. Total Disbursements (from Line 31)	8,534.7	8,534.7
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	17,108.3	17,108.3
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

ELEVENTH CONGRESSIONAL DIST. DEMOCRATIC Comm. OF VA

Report Covering the Period:

From:

06 ' 03 ' 2007

To:

06 ' 30 ' 2007

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

- (a) Individuals/Persons Other Than Political Committees
(i) Itemized (use Schedule A).....

(ii) Unitemized

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

(b) Political Party Committees

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

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

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

13. All Loans Received

14. Loan Repayments Received.....

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

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

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

18. Transfers from Non-Federal and Levin Funds

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

(b) Levin Funds (from Schedule H5)

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

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

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

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Page 4

COLUMN B
Calendar Year-to-Date

-

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	21,561.3	21,561.3
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21,561.3	21,561.3
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0	0
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0	0

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SCHEDULE F (FEC Form 3X)

**ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 1 OF 1
FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) ELEVENTH CONGRESSIONAL DIST. DEMOCRATIC PARTY OF VIRGINIA	<input type="checkbox"/> Check if 24-hour notice
--	---

Has your committee been designated to make
coordinated expenditures by a political party committee?
☐ YES ☒ NO
If YES, name the designating committee:

Full Name of Subordinate Committee

Mailing Address

City

State

ZIP Code

Full Name (Last, First, Middle Initial) of Each Payee

BROADSIDE

Mailing Address

4400 UNIVERSITY DRIVE

City

State

Zip Code

FAIRFAX

VA

22030

Name of Federal Candidate Supported

**ANDREW
HURST**

Office Sought:

☒ House

State: **VA**

Senate

District: **11**

Presidential

Aggregate General Election
Expenditure for this Candidate ▶

114694

Purpose of Expenditure

**PURCHASE OF
NEWSPAPER ADS**

004
Category/
Type

Date

02 / 01 / 2007

Amount

85347

☐ Limit Raised Due to Opponent's Spend-
ing (2 U.S.C. §441a(i)/441a-1)

Full Name (Last, First, Middle Initial) of Each Payee

Mailing Address

City

State

Zip Code

Name of Federal Candidate Supported

Office Sought:

House

State: _____

Senate

District: _____

Presidential

Aggregate General Election
Expenditure for this Candidate ▶

Purpose of Expenditure

Category/
Type

Date

Amount

☐ Limit Raised Due to Opponent's Spend-
ing (2 U.S.C. §441a(i)/441a-1)

Full Name (Last, First, Middle Initial) of Each Payee

Mailing Address

City

State

Zip Code

Name of Federal Candidate Supported

Office Sought:

House

State: _____

Senate

District: _____

Presidential

Aggregate General Election
Expenditure for this Candidate ▶

Purpose of Expenditure

Category/
Type

Date

Amount

☐ Limit Raised Due to Opponent's Spend-
ing (2 U.S.C. §441a(i)/441a-1)

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

85347

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

85347

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>Fed Ex</i>	
Shipping Date <i>7/21/07</i>	
Next Business Day Delivery <input checked="" type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked


PREPARER
(3/2005)

7/30/07
DATE PREPARED

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