

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

ADDRESS (number and street) 430 SOUTH CAPITOL STREET SE

Check if different than previously reported. (ACC) WASHINGTON DC 20003

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00460147

3. IS THIS REPORT NEW (N) OR AMENDED (A) 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] / [YYYY] in the State of []

- (d) 30-Day POST-Election Report for the:
- General (30G) Runoff (30R) Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [08] / [01] / [2011] through [08] / [31] / [2011]

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 Andrew Tobias

Signature of Treasurer Andrew Tobias [Electronically Filed] Date 12 / 05 / 2011

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									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2011"/>		1465912.63
(b) Cash on Hand at Beginning of Reporting Period.....	842175.42	
(c) Total Receipts (from Line 19)	196845.40	1075698.95
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1039020.82	2541611.58
7. Total Disbursements (from Line 31).....	224898.74	1727489.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	814122.08	814122.08
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)..... ▶	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
12. Transfers From Affiliated/Other Party Committees.....	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).....	196845.40	1075698.95
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (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))..... ▶	196845.40	1075698.95
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	196845.40	1075698.95

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	224898.74	1727489.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	224898.74	1727489.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	224898.74	1727489.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	224898.74	1727489.50

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)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	224898.74	1727489.50
37. Offsets to Operating Expenditures (from Line 15, page 3).....	196845.40	1075698.95
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	28053.34	651790.55

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 61
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

A. Obama Victory Fund 2012

Full Name (Last, First, Middle Initial)
Mailing Address 430 S. Capitol Street, SE

City Washington	State DC	Zip Code 20003
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FEC ID number of contributing federal political committee. **C**

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
697139.87

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	03	/	2011

Transaction ID : SA15-3467

Amount of Each Receipt this Period
50000.00

B. Obama Victory Fund 2012

Full Name (Last, First, Middle Initial)
Mailing Address 430 S. Capitol Street, SE

City Washington	State DC	Zip Code 20003
--------------------	-------------	-------------------

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
697139.87

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	11	/	2011

Transaction ID : SA15-3468

Amount of Each Receipt this Period
39506.40

C. Obama Victory Fund 2012

Full Name (Last, First, Middle Initial)
Mailing Address 430 S. Capitol Street, SE

City Washington	State DC	Zip Code 20003
--------------------	-------------	-------------------

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
697139.87

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	24	/	2011

Transaction ID : SA15-3469

Amount of Each Receipt this Period
107339.00

SUBTOTAL of Receipts This Page (optional).....▶	196845.40
TOTAL This Period (last page this line number only).....▶	196845.40

**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Friends of Blanche Lincoln Campaign Cmte

Mailing Address PO Box 3197

City Little Rock State AR Zip Code 72203

Purpose of Disbursement
Refund of Travel Deposit

Candidate Name

Friends of Blanche Lincoln Campaign Cmte

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2011

Transaction ID : SB21B-3321

Amount of Each Disbursement this Period

194.70

Full Name (Last, First, Middle Initial)

B. NE Victory 2010

Mailing Address 4900 Dodge Street

City Omaha State NE Zip Code 68132

Purpose of Disbursement
Refund of Travel Deposit

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2011

Transaction ID : SB21B-3322

Amount of Each Disbursement this Period

1862.67

Full Name (Last, First, Middle Initial)

C. John Spratt for Congress Cmte

Mailing Address P.O. Box 10986

City Rock Hill State SC Zip Code 29731

Purpose of Disbursement
Refund of Travel Deposit

Candidate Name

John Spratt for Congress Cmte

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2011

Transaction ID : SB21B-3324

Amount of Each Disbursement this Period

11192.88

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

15250.25

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

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**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Desiree E. Pipkins

Mailing Address 452 M Street, NW, Apt. 1

City Washington State DC Zip Code 20001

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2011

Transaction ID : SB21B-3325

Amount of Each Disbursement this Period

-17.00

Void Check - Lost

Full Name (Last, First, Middle Initial)

B. Desiree E. Pipkins

Mailing Address 452 M Street, NW, Apt. 1

City Washington State DC Zip Code 20001

Purpose of Disbursement
Airline Baggage Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2011

Transaction ID : SB21B-3326

Amount of Each Disbursement this Period

-25.00

Void Check - Lost

Full Name (Last, First, Middle Initial)

C. Desiree E. Pipkins

Mailing Address 452 M Street, NW, Apt. 1

City Washington State DC Zip Code 20001

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2011

Transaction ID : SB21B-3327

Amount of Each Disbursement this Period

-532.50

Void Check - Lost

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

-574.50

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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Anie Borja

Mailing Address 1100 1st Street, SE, Apt 811

City Washington State DC Zip Code 20003

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2011

Transaction ID : SB21B-3328

Amount of Each Disbursement this Period

35.00

Full Name (Last, First, Middle Initial)

B. Anie Borja

Mailing Address 1100 1st Street, SE, Apt 811

City Washington State DC Zip Code 20003

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2011

Transaction ID : SB21B-3329

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

C. Mark Critz for Congress Cmte

Mailing Address 647 Main Street, Suite 110

City Johnstown State PA Zip Code 15901

Purpose of Disbursement
Refund of Travel Deposit

Candidate Name

Mark Critz for Congress Cmte

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2011

Transaction ID : SB21B-3330

Amount of Each Disbursement this Period

432.14

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

1067.14

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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Kathy Dahlkemper for Congress

Mailing Address P.O. Box 1045

City Erie State PA Zip Code 16512

Purpose of Disbursement
Refund of Travel Deposit

Candidate Name

Kathy Dahlkemper for Congress

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		04		2011

Transaction ID : SB21B-3331

Amount of Each Disbursement this Period

432.14

Full Name (Last, First, Middle Initial)

B. Frances F. Denny

Mailing Address 182 E. 95th Street, Apt 21D

City New York State NY Zip Code 10128

Purpose of Disbursement
Events-Site Supplies

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		04		2011

Transaction ID : SB21B-3332

Amount of Each Disbursement this Period

10.70

Full Name (Last, First, Middle Initial)

C. Frances F. Denny

Mailing Address 182 E. 95th Street, Apt 21D

City New York State NY Zip Code 10128

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		04		2011

Transaction ID : SB21B-3333

Amount of Each Disbursement this Period

141.31

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

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

584.15

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**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Frances F. Denny

Mailing Address 182 E. 95th Street, Apt 21D

City State Zip Code
New York NY 10128

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	04	/	2011

Transaction ID : SB21B-3334

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

B. RACHEL E. FORDE

Mailing Address 13103 67TH AVE NE

City State Zip Code
ARLINGTON WA 98223

Purpose of Disbursement
Events-Site Supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	04	/	2011

Transaction ID : SB21B-3335

Amount of Each Disbursement this Period

5.11

Full Name (Last, First, Middle Initial)

C. RACHEL E. FORDE

Mailing Address 13103 67TH AVE NE

City State Zip Code
ARLINGTON WA 98223

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	04	/	2011

Transaction ID : SB21B-3336

Amount of Each Disbursement this Period

97.25

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

702.36

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

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**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. RACHEL E. FORDE

Mailing Address 13103 67TH AVE NE

City ARLINGTON State WA Zip Code 98223

Purpose of Disbursement
Airline Baggage Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2011

Transaction ID : SB21B-3337

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. RACHEL E. FORDE

Mailing Address 13103 67TH AVE NE

City ARLINGTON State WA Zip Code 98223

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2011

Transaction ID : SB21B-3338

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

C. Itai I. Grunfeld

Mailing Address 624 N. Virgil Avenue

City Los Angeles State CA Zip Code 90004

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2011

Transaction ID : SB21B-3339

Amount of Each Disbursement this Period

372.97

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

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

1022.97

**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Itai I. Grunfeld

Mailing Address 624 N. Virgil Avenue

City Los Angeles State CA Zip Code 90004

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	04	/	2011

Transaction ID : SB21B-3340

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

B. Zaina Javaid

Mailing Address 1234 Massachusetts Ave., NW
Apt. 703

City Washington State DC Zip Code 20005

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	04	/	2011

Transaction ID : SB21B-3341

Amount of Each Disbursement this Period

158.26

Full Name (Last, First, Middle Initial)

C. Zaina Javaid

Mailing Address 1234 Massachusetts Ave., NW
Apt. 703

City Washington State DC Zip Code 20005

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	04	/	2011

Transaction ID : SB21B-3342

Amount of Each Disbursement this Period

800.00

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

1558.26

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

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**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Kratovil for Congress

Mailing Address P.O. Box 518

City State Zip Code
Stevensville MD 21666

Purpose of Disbursement
Refund of Travel Deposit

Candidate Name

Kratovil for Congress

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2011

Transaction ID : SB21B-3343

Amount of Each Disbursement this Period

2100.00

Full Name (Last, First, Middle Initial)

B. Alexandra Levin

Mailing Address 400 S. Lafayette Street., Unit 502

City State Zip Code
Denver CO 80209

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2011

Transaction ID : SB21B-3344

Amount of Each Disbursement this Period

253.84

Full Name (Last, First, Middle Initial)

C. Alexandra Levin

Mailing Address 400 S. Lafayette Street., Unit 502

City State Zip Code
Denver CO 80209

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2011

Transaction ID : SB21B-3345

Amount of Each Disbursement this Period

800.00

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

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

3153.84

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**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. MASSACHUSETTS DEMOCRATIC STATE COMMITTEE

Mailing Address 77 Summer Street, 10th Floor

City Boston State MA Zip Code 02110

Purpose of Disbursement
Refund of Travel Deposit

Candidate Name
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2011

Transaction ID : SB21B-3346

Amount of Each Disbursement this Period

6180.87

Full Name (Last, First, Middle Initial)

B. Onorato for Governor LLC

Mailing Address P.O. Box 23205

City Pittsburgh State PA Zip Code 15222

Purpose of Disbursement
Refund of Travel Deposit

Candidate Name
Onorato for Governor LLC

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2011

Transaction ID : SB21B-3347

Amount of Each Disbursement this Period

1209.22

Full Name (Last, First, Middle Initial)

C. Desiree E. Pipkins

Mailing Address 452 M Street, NW, Apt. 1

City Washington State DC Zip Code 20001

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2011

Transaction ID : SB21B-3348

Amount of Each Disbursement this Period

17.00

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

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

7407.09

**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Desiree E. Pipkins

Mailing Address 452 M Street, NW, Apt. 1

City Washington State DC Zip Code 20001

Purpose of Disbursement
Airline Baggage Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2011

Transaction ID : SB21B-3349

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. Desiree E. Pipkins

Mailing Address 452 M Street, NW, Apt. 1

City Washington State DC Zip Code 20001

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2011

Transaction ID : SB21B-3350

Amount of Each Disbursement this Period

532.50

Full Name (Last, First, Middle Initial)

C. JESSE J ROSEN

Mailing Address 1045 W. County Line Road

City Bayside State WI Zip Code 53217

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2011

Transaction ID : SB21B-3351

Amount of Each Disbursement this Period

349.17

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

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

906.67

**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. JESSE J ROSEN

Mailing Address 1045 W. County Line Road

City Bayside State WI Zip Code 53217

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2011

Transaction ID : SB21B-3352

Amount of Each Disbursement this Period

800.00

Full Name (Last, First, Middle Initial)

B. Benjamin Solomon

Mailing Address 14 Black Birch Road

City Scotch Plains State NJ Zip Code 07076

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2011

Transaction ID : SB21B-3353

Amount of Each Disbursement this Period

267.67

Full Name (Last, First, Middle Initial)

C. Benjamin Solomon

Mailing Address 14 Black Birch Road

City Scotch Plains State NJ Zip Code 07076

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2011

Transaction ID : SB21B-3354

Amount of Each Disbursement this Period

600.00

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

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

1667.67

**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Braley for Congress

Mailing Address P.O. Box 390

City Waterloo State IA Zip Code 50704

Purpose of Disbursement
Refund of Travel Deposit

Candidate Name

Braley for Congress

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	08	/	2011

Transaction ID : SB21B-3355

Amount of Each Disbursement this Period

3991.73

Full Name (Last, First, Middle Initial)

B. John Leeper

Mailing Address 9480 Virginia Center Blvd #9

City Vienna State VA Zip Code 22181

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	08	/	2011

Transaction ID : SB21B-3356

Amount of Each Disbursement this Period

240.80

Full Name (Last, First, Middle Initial)

C. John Leeper

Mailing Address 9480 Virginia Center Blvd #9

City Vienna State VA Zip Code 22181

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	08	/	2011

Transaction ID : SB21B-3357

Amount of Each Disbursement this Period

600.00

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

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

4832.53

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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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Nicole Lynch

Mailing Address 7 Avenue A, 2nd Floor

City New York State NY Zip Code 10009

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2011

Transaction ID : SB21B-3358

Amount of Each Disbursement this Period

70.00

Full Name (Last, First, Middle Initial)

B. Nicole Lynch

Mailing Address 7 Avenue A, 2nd Floor

City New York State NY Zip Code 10009

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2011

Transaction ID : SB21B-3359

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

C. Jaime Moore

Mailing Address 1451 Walz Avenue

City Glenwood Springs State CO Zip Code 81601

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2011

Transaction ID : SB21B-3360

Amount of Each Disbursement this Period

600.00

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

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

1370.00

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

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

FOR LINE NUMBER:
(check only one)

<input 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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Perriello for Congress

Mailing Address P.O. Box 306

City State Zip Code
Ivy VA 22945

Purpose of Disbursement
Refund of Travel Deposit

Candidate Name

Perriello for Congress

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		08		2011

Transaction ID : SB21B-3361

Amount of Each Disbursement this Period

6538.21

Full Name (Last, First, Middle Initial)

B. William Scott Pollard

Mailing Address 1504 Twilight Ridge

City State Zip Code
Austin TX 78746

Purpose of Disbursement
Events-Site Supplies

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		08		2011

Transaction ID : SB21B-3362

Amount of Each Disbursement this Period

13.25

Full Name (Last, First, Middle Initial)

C. William Scott Pollard

Mailing Address 1504 Twilight Ridge

City State Zip Code
Austin TX 78746

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		08		2011

Transaction ID : SB21B-3363

Amount of Each Disbursement this Period

36.00

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

6587.46

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

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**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. William Scott Pollard

Mailing Address 1504 Twilight Ridge

City Austin State TX Zip Code 78746

Purpose of Disbursement
Airline Baggage Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2011

Transaction ID : SB21B-3364

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. William Scott Pollard

Mailing Address 1504 Twilight Ridge

City Austin State TX Zip Code 78746

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2011

Transaction ID : SB21B-3365

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. JESSE J ROSEN

Mailing Address 1045 W. County Line Road

City Bayside State WI Zip Code 53217

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2011

Transaction ID : SB21B-3366

Amount of Each Disbursement this Period

125.00

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

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

650.00

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

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

FOR LINE NUMBER:
(check only one)

<input 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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. JESSE J ROSEN

Mailing Address 1045 W. County Line Road

City Bayside State WI Zip Code 53217

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2011

Transaction ID : SB21B-3367

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

B. Roy Sherman

Mailing Address 1020 SE 5th Avenue

City Pompano Beach State FL Zip Code 33060

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2011

Transaction ID : SB21B-3368

Amount of Each Disbursement this Period

19.07

Full Name (Last, First, Middle Initial)

C. Roy Sherman

Mailing Address 1020 SE 5th Avenue

City Pompano Beach State FL Zip Code 33060

Purpose of Disbursement
Airline Baggage Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2011

Transaction ID : SB21B-3369

Amount of Each Disbursement this Period

25.00

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

444.07

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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Roy Sherman

Mailing Address 1020 SE 5th Avenue

City Pompano Beach State FL Zip Code 33060

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	08	/	2011

Transaction ID : SB21B-3370

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Abbey Watson

Mailing Address 512B 6th Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	08	/	2011

Transaction ID : SB21B-3371

Amount of Each Disbursement this Period

56.50

Full Name (Last, First, Middle Initial)

C. Abbey Watson

Mailing Address 512B 6th Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	08	/	2011

Transaction ID : SB21B-3372

Amount of Each Disbursement this Period

600.00

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

1156.50

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

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**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Abbey Watson

Mailing Address 512B 6th Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2011

Transaction ID : SB21B-3373

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

B. Noam Bar-Zemer

Mailing Address 15 Laurel Court

City Providence State RI Zip Code 02906

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3379

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Patrick Bauer

Mailing Address 82 Sea Cliff Avenue

City Sea Cliff State NY Zip Code 11579

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3380

Amount of Each Disbursement this Period

232.50

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

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

1332.50

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

Use separate schedule(s)
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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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Patrick Bauer

Mailing Address 82 Sea Cliff Avenue

City State Zip Code
Sea Cliff NY 11579

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3381

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

B. Kathryn Edwards

Mailing Address 1062 Hillcrest Drive

City State Zip Code
Troy OH 45373

Purpose of Disbursement
Airline Baggage Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3382

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. Kathryn Edwards

Mailing Address 1062 Hillcrest Drive

City State Zip Code
Troy OH 45373

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3383

Amount of Each Disbursement this Period

600.00

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

1350.00

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

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**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Kathryn Edwards

Mailing Address 1062 Hillcrest Drive

City Troy State OH Zip Code 45373

Purpose of Disbursement
Airline Baggage Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3384

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. Kathryn Edwards

Mailing Address 1062 Hillcrest Drive

City Troy State OH Zip Code 45373

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3385

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

C. Harvey Greene

Mailing Address 7589 NW 117TH LANE

City PARKLAND State FL Zip Code 33076

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3386

Amount of Each Disbursement this Period

113.01

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

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

738.01

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

Use separate schedule(s)
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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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Harvey Greene

Mailing Address 7589 NW 117TH LANE

City PARKLAND State FL Zip Code 33076

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3387

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

B. John Leeper

Mailing Address 9480 Virginia Center Blvd #9

City Vienna State VA Zip Code 22181

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3388

Amount of Each Disbursement this Period

359.58

Full Name (Last, First, Middle Initial)

C. John Leeper

Mailing Address 9480 Virginia Center Blvd #9

City Vienna State VA Zip Code 22181

Purpose of Disbursement
Airline Baggage Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3389

Amount of Each Disbursement this Period

10.00

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

969.58

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

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**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. John Leeper

Mailing Address 9480 Virginia Center Blvd #9

City Vienna State VA Zip Code 22181

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3390

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

B. GREG MAYS

Mailing Address PO BOX 25153

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3391

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. GREG MAYS

Mailing Address PO BOX 25153

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement
Airline Baggage Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3392

Amount of Each Disbursement this Period

50.00

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

670.00

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

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**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. GREG MAYS

Mailing Address PO BOX 25153

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3393

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

B. Christopher Mussett

Mailing Address 3814 Washington Avenue

City Des Moines State IA Zip Code 50310

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3394

Amount of Each Disbursement this Period

44.15

Full Name (Last, First, Middle Initial)

C. Christopher Mussett

Mailing Address 3814 Washington Avenue

City Des Moines State IA Zip Code 50310

Purpose of Disbursement
Airline Baggage Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3395

Amount of Each Disbursement this Period

50.00

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

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

394.15

**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Christopher Mussett

Mailing Address 3814 Washington Avenue

City Des Moines State IA Zip Code 50310

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3396

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

B. Evelyn Marie Prentice

Mailing Address 634 Kling Street, Apt A

City Akron State OH Zip Code 44311

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3397

Amount of Each Disbursement this Period

107.60

Full Name (Last, First, Middle Initial)

C. Evelyn Marie Prentice

Mailing Address 634 Kling Street, Apt A

City Akron State OH Zip Code 44311

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3398

Amount of Each Disbursement this Period

500.00

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

1307.60

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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Evelyn Marie Prentice

Mailing Address 634 Kling Street, Apt A

City Akron State OH Zip Code 44311

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3399

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

B. Bruce Prunty

Mailing Address 8324 Mullen

City Lenexa State KS Zip Code 66215

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3400

Amount of Each Disbursement this Period

32.64

Full Name (Last, First, Middle Initial)

C. Bruce Prunty

Mailing Address 8324 Mullen

City Lenexa State KS Zip Code 66215

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3401

Amount of Each Disbursement this Period

300.00

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

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

632.64

**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. GLEN RYNIEWSKI

Mailing Address 6104 W. HENDERSON

City CHICAGO State IL Zip Code 60634

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3402

Amount of Each Disbursement this Period

82.00

Full Name (Last, First, Middle Initial)

B. GLEN RYNIEWSKI

Mailing Address 6104 W. HENDERSON

City CHICAGO State IL Zip Code 60634

Purpose of Disbursement
Airline Baggage Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3403

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. GLEN RYNIEWSKI

Mailing Address 6104 W. HENDERSON

City CHICAGO State IL Zip Code 60634

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3404

Amount of Each Disbursement this Period

600.00

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

732.00

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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. GLEN RYNIIEWSKI

Mailing Address 6104 W. HENDERSON

City State Zip Code
CHICAGO IL 60634

Purpose of Disbursement
Car Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3405

Amount of Each Disbursement this Period

253.83

Full Name (Last, First, Middle Initial)

B. Bradford A. Simmons

Mailing Address 6310 Mossway

City State Zip Code
Baltimore MD 21212

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3406

Amount of Each Disbursement this Period

55.00

Full Name (Last, First, Middle Initial)

C. Bradford A. Simmons

Mailing Address 6310 Mossway

City State Zip Code
Baltimore MD 21212

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3407

Amount of Each Disbursement this Period

300.00

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

608.83

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

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**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Abbey Watson

Mailing Address 512B 6th Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3408

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

B. WHITE HOUSE AIRLIFT OPERATIONS

Mailing Address 1600 Pennsylvania Avenue, NW
EEOB Room #25

City Washington State DC Zip Code 20502

Purpose of Disbursement
White House Airlift In-flight Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3409

Amount of Each Disbursement this Period

49.48

Full Name (Last, First, Middle Initial)

C. WHITE HOUSE AIRLIFT OPERATIONS

Mailing Address 1600 Pennsylvania Avenue, NW
EEOB Room #25

City Washington State DC Zip Code 20502

Purpose of Disbursement
White House Airlift Helo

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3410

Amount of Each Disbursement this Period

589.50

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

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

1238.98

**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. WHITE HOUSE AIRLIFT OPERATIONS

Mailing Address 1600 Pennsylvania Avenue, NW
EEOB Room #25

City Washington State DC Zip Code 20502

Purpose of Disbursement
White House Airlift Airfare

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3411

Amount of Each Disbursement this Period

6189.37

Full Name (Last, First, Middle Initial)

B. WHITE HOUSE AIRLIFT OPERATIONS

Mailing Address 1600 Pennsylvania Avenue, NW
EEOB Room #25

City Washington State DC Zip Code 20502

Purpose of Disbursement
White House Airlift Airfare

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3412

Amount of Each Disbursement this Period

4278.46

Full Name (Last, First, Middle Initial)

C. WHITE HOUSE AIRLIFT OPERATIONS

Mailing Address 1600 Pennsylvania Avenue, NW
EEOB Room #25

City Washington State DC Zip Code 20502

Purpose of Disbursement
White House Airlift Helo

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3413

Amount of Each Disbursement this Period

753.64

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

11221.47

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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. WHITE HOUSE AIRLIFT OPERATIONS

Mailing Address 1600 Pennsylvania Avenue, NW
EEOB Room #25

City Washington State DC Zip Code 20502

Purpose of Disbursement
White House Airlift In-flight Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3414

Amount of Each Disbursement this Period

89.17

Full Name (Last, First, Middle Initial)

B. WHITE HOUSE AIRLIFT OPERATIONS

Mailing Address 1600 Pennsylvania Avenue, NW
EEOB Room #25

City Washington State DC Zip Code 20502

Purpose of Disbursement
White House Airlift In-flight Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3415

Amount of Each Disbursement this Period

86.81

Full Name (Last, First, Middle Initial)

C. WHITE HOUSE AIRLIFT OPERATIONS

Mailing Address 1600 Pennsylvania Avenue, NW
EEOB Room #25

City Washington State DC Zip Code 20502

Purpose of Disbursement
White House Airlift Airfare

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3416

Amount of Each Disbursement this Period

16281.21

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

16457.19

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

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**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. WHITE HOUSE AIRLIFT OPERATIONS

Mailing Address 1600 Pennsylvania Avenue, NW
EEOB Room #25

City Washington State DC Zip Code 20502

Purpose of Disbursement
White House Airlift In-flight Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B-3417

Amount of Each Disbursement this Period

3	3	.	2	4
---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. WHITE HOUSE AIRLIFT OPERATIONS

Mailing Address 1600 Pennsylvania Avenue, NW
EEOB Room #25

City Washington State DC Zip Code 20502

Purpose of Disbursement
White House Airlift Helo

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B-3418

Amount of Each Disbursement this Period

1	0	7	1	.	4	4
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. WHITE HOUSE AIRLIFT OPERATIONS

Mailing Address 1600 Pennsylvania Avenue, NW
EEOB Room #25

City Washington State DC Zip Code 20502

Purpose of Disbursement
White House Airlift Airfare

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B-3419

Amount of Each Disbursement this Period

1	0	9	2	.	6	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

1	2	0	3	.	4	2	8
---	---	---	---	---	---	---	---

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

1	2	0	3	.	4	2	8
---	---	---	---	---	---	---	---

**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. WHITE HOUSE AIRLIFT OPERATIONS

Mailing Address 1600 Pennsylvania Avenue, NW
EEOB Room #25

City Washington State DC Zip Code 20502

Purpose of Disbursement
White House Airlift In-flight Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3420

Amount of Each Disbursement this Period

9.92

Full Name (Last, First, Middle Initial)

B. WHITE HOUSE AIRLIFT OPERATIONS

Mailing Address 1600 Pennsylvania Avenue, NW
EEOB Room #25

City Washington State DC Zip Code 20502

Purpose of Disbursement
White House Airlift Helo

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3421

Amount of Each Disbursement this Period

97.08

Full Name (Last, First, Middle Initial)

C. WHITE HOUSE AIRLIFT OPERATIONS

Mailing Address 1600 Pennsylvania Avenue, NW
EEOB Room #25

City Washington State DC Zip Code 20502

Purpose of Disbursement
White House Airlift Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3422

Amount of Each Disbursement this Period

492.64

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

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

599.64

**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. WHITE HOUSE AIRLIFT OPERATIONS

Mailing Address 1600 Pennsylvania Avenue, NW
EEOB Room #25

City Washington State DC Zip Code 20502

Purpose of Disbursement
White House Airlift In-flight Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3423

Amount of Each Disbursement this Period

27.07

Full Name (Last, First, Middle Initial)

B. WHITE HOUSE AIRLIFT OPERATIONS

Mailing Address 1600 Pennsylvania Avenue, NW
EEOB Room #25

City Washington State DC Zip Code 20502

Purpose of Disbursement
White House Airlift Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3424

Amount of Each Disbursement this Period

1475.12

Full Name (Last, First, Middle Initial)

C. WHITE HOUSE AIRLIFT OPERATIONS

Mailing Address 1600 Pennsylvania Avenue, NW
EEOB Room #25

City Washington State DC Zip Code 20502

Purpose of Disbursement
White House Airlift In-flight Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3425

Amount of Each Disbursement this Period

74.18

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

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

1576.37

**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. WHITE HOUSE AIRLIFT OPERATIONS

Mailing Address 1600 Pennsylvania Avenue, NW
EEOB Room #25

City Washington State DC Zip Code 20502

Purpose of Disbursement
White House Airlift Helo

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3426

Amount of Each Disbursement this Period

1300.38

Full Name (Last, First, Middle Initial)

B. WHITE HOUSE AIRLIFT OPERATIONS

Mailing Address 1600 Pennsylvania Avenue, NW
EEOB Room #25

City Washington State DC Zip Code 20502

Purpose of Disbursement
White House Airlift Airfare

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3427

Amount of Each Disbursement this Period

4944.54

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address P O BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
Travel Agent fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3462

Amount of Each Disbursement this Period

635.00

See Attached Memo Entry

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

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

6879.92

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**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Travel Agency Service

Mailing Address 3415 E Kiehl Ave

City Little Rock State AR Zip Code 72205

Purpose of Disbursement
Travel Agent fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3462-10000

Amount of Each Disbursement this Period

635.00

[MEMO ITEM]

Memo Entry

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address P O BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3463

Amount of Each Disbursement this Period

15166.70

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4333 Amon Carter Boulevard

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3463-10000

Amount of Each Disbursement this Period

1933.00

[MEMO ITEM]

Memo Entry

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

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

15166.70

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**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Continental Airlines

Mailing Address 1600 Smith Street

City Houston State TX Zip Code 77002

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B-3463-20000

Amount of Each Disbursement this Period

8	5	7	.	0	0
---	---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Delta Air Lines, Inc.

Mailing Address 1030 Delta Boulevard

City Atlanta State GA Zip Code 30320

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B-3463-30000

Amount of Each Disbursement this Period

3	7	6	.	9	1	0
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[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. Frontier Airlines

Mailing Address Frontier Center One
7001 Tower Road

City Denver State CO Zip Code 80249

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B-3463-40000

Amount of Each Disbursement this Period

3	8	2	.	4	0
---	---	---	---	---	---

[MEMO ITEM]
Memo Entry

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

0	0	0
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TOTAL This Period (last page this line number only)..... ▶

0	0	0
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**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DR

City DALLAS State TX Zip Code 75235

Purpose of Disbursement Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3463-50000

Amount of Each Disbursement this Period

672.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address 77 W. Wacker Drive

City Chicago State IL Zip Code 60601

Purpose of Disbursement Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3463-60000

Amount of Each Disbursement this Period

7572.40

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. US Airways Group Inc.

Mailing Address 111 W. Rio Salado Pkwy

City Tempe State AZ Zip Code 85281

Purpose of Disbursement Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3463-70000

Amount of Each Disbursement this Period

-19.20

[MEMO ITEM]
Memo Entry

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

0.00

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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address P O BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
Train/Bus Travel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3464

Amount of Each Disbursement this Period

135.30

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. Amtrak

Mailing Address Union Station
50 Massachusetts Ave., NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Train/Bus Travel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3464-10000

Amount of Each Disbursement this Period

135.30

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address P O BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
Lodging & Catering

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3465

Amount of Each Disbursement this Period

53004.79

See Attached Memo Entry

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

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

53140.09

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**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Embassy Suites Hotel

Mailing Address 8000 Tartak Street
Isle Verde

City Carolina State PR Zip Code 00979

Purpose of Disbursement
Lodging & Catering

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B-3465-10000

Amount of Each Disbursement this Period

1	4	9	5	.	1	1
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[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. InterContinental Miami

Mailing Address 100 Chopin Plaza

City Miami State FL Zip Code 33131

Purpose of Disbursement
Lodging & Catering

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B-3465-20000

Amount of Each Disbursement this Period

1	7	4	3	2	.	5	6
---	---	---	---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. InterContinental New York Barclay

Mailing Address 111 East 48th Street

City New York State NY Zip Code 10017

Purpose of Disbursement
Lodging & Catering

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B-3465-30000

Amount of Each Disbursement this Period

1	5	1	2	5	.	0	0
---	---	---	---	---	---	---	---

[MEMO ITEM]
Memo Entry

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

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

0	0	0
---	---	---

0	0	0
---	---	---

**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Radisson Nashua Hotel

Mailing Address 11 Tara Boulevard

City State Zip Code
Nashua NH 03062

Purpose of Disbursement
Lodging & Catering

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B-3465-40000

Amount of Each Disbursement this Period

1	5	0	0	0	0
---	---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Renaissance Philadelphia Airport

Mailing Address 500 Stevens Drive

City State Zip Code
Philadelphia PA 19113

Purpose of Disbursement
Lodging & Catering

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B-3465-50000

Amount of Each Disbursement this Period

9	4	1	2	8	0
---	---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. Residence Inn Atlanta Downtown

Mailing Address 134 Peachtree Street NW

City State Zip Code
Atlanta GA 30303

Purpose of Disbursement
Lodging & Catering

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B-3465-60000

Amount of Each Disbursement this Period

2	1	6	8	3	6
---	---	---	---	---	---

[MEMO ITEM]
Memo Entry

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

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

0	0	0	0	0	0
---	---	---	---	---	---

0	0	0	0	0	0
---	---	---	---	---	---

**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Sheraton Denver Hotel

Mailing Address 1550 Court Place

City State Zip Code
Denver CO 80202

Purpose of Disbursement
Lodging & Catering

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3465-70000

Amount of Each Disbursement this Period

3035.96

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. The Annabelle Inn

Mailing Address 232 West Main Street

City State Zip Code
Aspen CO 81611

Purpose of Disbursement
Lodging & Catering

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3465-80000

Amount of Each Disbursement this Period

2835.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address P O BOX 1270

City State Zip Code
NEWARK NJ 07101

Purpose of Disbursement
Car Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3466

Amount of Each Disbursement this Period

8718.31

See Attached Memo Entry

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

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

8718.31

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**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Avis Rent-A-Car

Mailing Address 233 East Airport Rd., Suite G

City Aspen State CO Zip Code 81611

Purpose of Disbursement
Car Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3466-10000

Amount of Each Disbursement this Period

1112.30

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Avis Rent-A-Car

Mailing Address 10000 Bessie Coleman Drive

City Chicago State IL Zip Code 60666

Purpose of Disbursement
Car Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3466-20000

Amount of Each Disbursement this Period

2654.77

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. Avis Rent-A-Car

Mailing Address 510 La Guardia Airport
Suite 25

City Flushing State NY Zip Code 11371

Purpose of Disbursement
Car Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3466-30000

Amount of Each Disbursement this Period

635.28

[MEMO ITEM]
Memo Entry

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

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

0.00

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**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Avis Rent-A-Car

Mailing Address 510 La Guardia Airport
Suite 25

City Flushing State NY Zip Code 11371

Purpose of Disbursement
Car Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3466-40000

Amount of Each Disbursement this Period

75.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Avis Rent-A-Car Tolls

Mailing Address P.O. Box 222209

City Great Neck State NY Zip Code 11022

Purpose of Disbursement
Car Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3466-50000

Amount of Each Disbursement this Period

29.55

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. Budget Rent-A-Car

Mailing Address Liberty Intl Airport
38 Carson Road

City Newark State NJ Zip Code 07114

Purpose of Disbursement
Car Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3466-60000

Amount of Each Disbursement this Period

185.63

[MEMO ITEM]
Memo Entry

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input 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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Budget Rent-A-Car Tolls

Mailing Address 11 Grace Avenue, Suite 108

City State Zip Code
Great Neck NY 11021

Purpose of Disbursement
Car Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3466-70000

Amount of Each Disbursement this Period

13.65

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Enterprise Rent-A-Car

Mailing Address PO Box 795153

City State Zip Code
St. Louis MO 63179

Purpose of Disbursement
Car Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3466-80000

Amount of Each Disbursement this Period

762.09

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. Hertz Car Rental

Mailing Address 233 E Airport Road #H

City State Zip Code
Aspen CO 81611

Purpose of Disbursement
Car Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2011

Transaction ID : SB21B-3466-90000

Amount of Each Disbursement this Period

861.03

[MEMO ITEM]
Memo Entry

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

0.00

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

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**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. HERTZ CAR RENTAL

Mailing Address Newark Intl Airport
23 Newark Airport, Bldg 23

City NEWARK State NJ Zip Code 07114

Purpose of Disbursement
Car Rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3466-100000

Amount of Each Disbursement this Period

816.38

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Hertz Car Rental

Mailing Address Salt Lake City Intl Airport
775 North Terminal Drive

City Salt Lake City State UT Zip Code 84122

Purpose of Disbursement
Car Rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3466-110000

Amount of Each Disbursement this Period

1113.82

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. Hertz Corporation

Mailing Address Commercial Billing Dept.
PO Box 121124

City Dallas State TX Zip Code 75312

Purpose of Disbursement
Car Rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2011

Transaction ID : SB21B-3466-120000

Amount of Each Disbursement this Period

458.81

[MEMO ITEM]
Memo Entry

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input 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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Missouri Victory 2010

Mailing Address P.O. Box 719

City Jefferson City State MO Zip Code 65102

Purpose of Disbursement
Refund of Travel Deposit

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B-3430

Amount of Each Disbursement this Period

-	1	0	4	0	3	.	0	1
---	---	---	---	---	---	---	---	---

Void Check - Wrong Vendor

Full Name (Last, First, Middle Initial)

B. Robin Carnahan for Senate

Mailing Address PO Box 50378

City St. Louis State MO Zip Code 63105

Purpose of Disbursement
Refund of Travel Deposit

Candidate Name

Robin Carnahan for Senate

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	1	1

Transaction ID : SB21B-3431

Amount of Each Disbursement this Period

2	4	6	8	.	6	4
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Hodes for Senate

Mailing Address 75 S Main Street, #253

City Concord State NH Zip Code 03301

Purpose of Disbursement
Refund of Travel Deposit

Candidate Name

Hodes for Senate

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	1	1

Transaction ID : SB21B-3432

Amount of Each Disbursement this Period

1	2	5	9	.	9	4
---	---	---	---	---	---	---

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

-	6	6	7	.	4	3
---	---	---	---	---	---	---

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

-	6	6	7	.	4	3
---	---	---	---	---	---	---

**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. MISSOURI DEMOCRATIC PARTY

Mailing Address P.O. BOX 719

City State Zip Code
JEFFERSON CITY MO 65102

Purpose of Disbursement
Refund of Travel Deposit

Candidate Name

MISSOURI DEMOCRATIC PARTY

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	1	1

Transaction ID : SB21B-3433

Amount of Each Disbursement this Period

7	9	3	4	.	3	7
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. New Hampshire Democratic Party

Mailing Address 105 North State Street

City State Zip Code
Concord NH 03301

Purpose of Disbursement
Refund of Travel Deposit

Candidate Name

New Hampshire Democratic Party

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	1	1

Transaction ID : SB21B-3434

Amount of Each Disbursement this Period

1	6	8	1	.	9	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Committee to Re-Elect Loretta Sanchez

Mailing Address 1212 S Victory

City State Zip Code
Burbank CA 91502

Purpose of Disbursement
Refund of Travel Deposit

Candidate Name

Committee to Re-Elect Loretta Sanchez

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	1	1

Transaction ID : SB21B-3435

Amount of Each Disbursement this Period

1	6	0	0	.	0	0
---	---	---	---	---	---	---

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

1	1	2	1	6	.	2	7
---	---	---	---	---	---	---	---

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

1	1	2	1	6	.	2	7
---	---	---	---	---	---	---	---

**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Carol Shea-Porter for Congress

Mailing Address PO Box 453

City Rochester State NH Zip Code 03866

Purpose of Disbursement
Refund of Travel Deposit

Candidate Name

Carol Shea-Porter for Congress

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 29 / 2011

Transaction ID : SB21B-3436

Amount of Each Disbursement this Period

1282.34

Full Name (Last, First, Middle Initial)

B. DEPARTMENT OF TREASURY

Mailing Address P.O. BOX 27800

City WASHINGTON State DC Zip Code 20038-7800

Purpose of Disbursement
Lodging & Catering

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 30 / 2011

Transaction ID : SB21B-3437

Amount of Each Disbursement this Period

2507.67

Full Name (Last, First, Middle Initial)

C. DEPARTMENT OF TREASURY

Mailing Address P.O. BOX 27800

City WASHINGTON State DC Zip Code 20038-7800

Purpose of Disbursement
Lodging & Catering

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 30 / 2011

Transaction ID : SB21B-3438

Amount of Each Disbursement this Period

-939.60

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

2850.41

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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Kristina Broadie

Mailing Address 10606 Pinedale Drive

City Silver Spring State MD Zip Code 20901

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	30	/	2011

Transaction ID : SB21B-3439

Amount of Each Disbursement this Period

22.36

Full Name (Last, First, Middle Initial)

B. Kristina Broadie

Mailing Address 10606 Pinedale Drive

City Silver Spring State MD Zip Code 20901

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	30	/	2011

Transaction ID : SB21B-3440

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

C. Jeff Goldstein

Mailing Address 30 Mill Street

City Newton State MA Zip Code 02459

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	30	/	2011

Transaction ID : SB21B-3441

Amount of Each Disbursement this Period

100.00

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

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

222.36

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**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. DAVID GREELISH

Mailing Address 306 Dartmouth St.
Suite 200

City Boston State MA Zip Code 02116

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 30 / 2011

Transaction ID : SB21B-3442

Amount of Each Disbursement this Period

115.00

Full Name (Last, First, Middle Initial)

B. DAVID GREELISH

Mailing Address 306 Dartmouth St.
Suite 200

City Boston State MA Zip Code 02116

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 30 / 2011

Transaction ID : SB21B-3443

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

C. Helen Langan

Mailing Address 834 East Bryan Avenue

City Salt Lake City State UT Zip Code 84105

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 30 / 2011

Transaction ID : SB21B-3444

Amount of Each Disbursement this Period

600.00

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

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

1315.00

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

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

FOR LINE NUMBER:
(check only one)

<input 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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Jeani Murray

Mailing Address 1417 Chapin Street, NW, #302

City Washington State DC Zip Code 20009

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	30	/	2011

Transaction ID : SB21B-3447

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

B. Murray Victory 2010

Mailing Address 1050 17th Street, NW
Suite 590

City Washington State DC Zip Code 20036

Purpose of Disbursement
Refund of Travel Deposit

Candidate Name

Murray Victory 2010

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	30	/	2011

Transaction ID : SB21B-3449

Amount of Each Disbursement this Period

28549.98

Full Name (Last, First, Middle Initial)

C. TYLER NORMAN

Mailing Address 128 W. 13th Street, #26

City New York State NY Zip Code 10011

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	30	/	2011

Transaction ID : SB21B-3450

Amount of Each Disbursement this Period

76.25

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

29226.23

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

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**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. TYLER NORMAN

Mailing Address 128 W. 13th Street, #26

City State Zip Code
New York NY 10011

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	30	/	2011

Transaction ID : SB21B-3451

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

B. Benjamin Solomon

Mailing Address 14 Black Birch Road

City State Zip Code
Scotch Plains NJ 07076

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	30	/	2011

Transaction ID : SB21B-3452

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

C. Benjamin Solomon

Mailing Address 14 Black Birch Road

City State Zip Code
Scotch Plains NJ 07076

Purpose of Disbursement
Events-Site Supplies

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	30	/	2011

Transaction ID : SB21B-3453

Amount of Each Disbursement this Period

7.29

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

707.29

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

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**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Benjamin Solomon

Mailing Address 14 Black Birch Road

City State Zip Code
Scotch Plains NJ 07076

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	30	/	2011

Transaction ID : SB21B-3454

Amount of Each Disbursement this Period

163.70

Full Name (Last, First, Middle Initial)

B. Benjamin Solomon

Mailing Address 14 Black Birch Road

City State Zip Code
Scotch Plains NJ 07076

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	30	/	2011

Transaction ID : SB21B-3455

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

C. Marik von Rennenkampff

Mailing Address 1755 T Street, NW

City State Zip Code
Washington DC 20009

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	30	/	2011

Transaction ID : SB21B-3456

Amount of Each Disbursement this Period

95.10

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

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

858.80

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**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Marik von Rennenkampff

Mailing Address 1755 T Street, NW

City Washington State DC Zip Code 20009

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 30 / 2011

Transaction ID : SB21B-3457

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

B. DEPARTMENT OF TREASURY

Mailing Address P.O. BOX 27800

City WASHINGTON State DC Zip Code 20038-7800

Purpose of Disbursement
Lodging & Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 30 / 2011

Transaction ID : SB21B-3458

Amount of Each Disbursement this Period

17.90

Full Name (Last, First, Middle Initial)

C. DEPARTMENT OF TREASURY

Mailing Address P.O. BOX 27800

City WASHINGTON State DC Zip Code 20038-7800

Purpose of Disbursement
Lodging & Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 30 / 2011

Transaction ID : SB21B-3459

Amount of Each Disbursement this Period

279.30

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

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

897.20

**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)

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Full Name (Last, First, Middle Initial)

A. Kathryn Minor

Mailing Address 1323 28th Street, NW

City Washington State DC Zip Code 20007

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	30	/	2011

Transaction ID : SB21B-3460

Amount of Each Disbursement this Period

124.89

Full Name (Last, First, Middle Initial)

B. Kathryn Minor

Mailing Address 1323 28th Street, NW

City Washington State DC Zip Code 20007

Purpose of Disbursement
Advance Team Stipend

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	30	/	2011

Transaction ID : SB21B-3461

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

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

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

724.89

224898.74
