09/20/2011 13:32

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# FEC FORM 3X

FE6AN026

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT 430 SOUTH CAPITOL STREET SE ADDRESS (number and street) Check if different than previously WASHINGTON DC 20003 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** C00460147 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 08 0 1 2011 8 0 3 1 2011 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. **ANDREW TOBIAS** Type or Print Name of Treasurer Electronically Filed by **ANDREW TOBIAS** 09 20 2011 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

# SUMMARY PAGE OF RECEIPTS AND DISRUPSEMENTS

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT D D " D 0 1 3 1 08 2011 0.8 2011 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2011<sup>°</sup> 1465912.63 January 1 (b) Cash on Hand at 842175.42 Begining of Reporting Period ..... 196845.40 1075698.95 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 1039020.82 2541611.58 6(a) and 6(c) for Column B) ..... 224898.74 1727489.50 Total Disbursements (from Line 31) ..... Cash on Hand at Close of Reporting Period 814122.08 814122.08 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

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

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

### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

м м 0 1 м°м 8 0 3 1 2 0 1 1 2011 Report Covering the Period: From: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 0.00 0.00 (i) Itemized (use Schedule A) ...... 0.00 0.00 (ii) Unitemized ..... (iii) TOTAL (add 0.00 0.00 Lines 11(a)(i) and (ii) ...... 0.00 0.00 (b) Political Party Committees ..... Other Political Committees 0.00 0.00 (such as PACs) ..... Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 0.00 0.00 Totals to Line 33, page 5) ..... 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees ..... 0.00 0.00 13. All Loans Received ..... 0.00 0.00 14. Loan Repayments Received ..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 196845.40 1075698.95 (Carry Totals to Line 37, page 5) ..... 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees ..... 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) ..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) ..... 0.00 0.00 (b) Levin Funds (from Schedule H5) ...... 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 196845.40 1075698.95 12, 13, 14, 15, 16, 17, and 18(c)) ...... 20. Total Federal Receipts 196845.40 1075698.95 (subtract Line 18(c) from Line 19) .....

FE6AN026

### 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:	TOTAL THIS PERIOD	Calendar Year-to-Date
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	2.22	0.22
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	004000.74	1707400 50
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		172,100,00
Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00
	0.00	0.00
4. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party		
Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
OC. Long Departments Made	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	0.00	0.00
(add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements	0.00	0.00
On Foderal Floation Astists (O.H.O.O. 101 (CO))		
<ol> <li>Federal Election Activity (2 U.S.C 431(20))</li> <li>(a) Shared Federal Election Activity</li> </ol>		
(from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely	2.22	0.00
With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))		
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)	004000.74	1707100 50
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
86.	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

FE6AN026

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for e	separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 6 / 62 (check only one)  11a 11b 11c 12 13 14 X 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  DEMOCRATIC NATIONAL COMMITT			on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Obama Victory Fund 2012 Mailing Address 430 S. Capitol Street,  City Washington  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary General	State Zip		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Obama Victory Fund 2012 Mailing Address 430 S. Capitol Street,  City Washington  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary Other (specify)   General	State Zip	697139.87 o Code 0003 o-Date ▼ 697139.87	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Obama Victory Fund 2012 Mailing Address 430 S. Capitol Street,  City Washington  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary General Other (specify)	State Zip	o Code 0003 o-Date ▼ 697139.87	Date of Receipt  M M M D D D D Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number		<u> </u>	196845.40

В.

C.

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

FOR LINE NUMBER: PAGE 7/62 Use separate schedule(s) (check only one) for each category of the 21b 22 23 25 26 Detailed Summary Page 27 28a 28b 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-3320 Friends of Blanche Lincoln Campaign Cmte Date of Disbursement 0 2 0 8 2011 Mailing Address PO Box 3197 Zip Code City State Amount of Each Disbursement this Period Little Rock 72203 AR -10.00 Purpose of Disbursement Other Candidate Name Category/ Friends of Blanche Lincoln Campaign Cmte Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-3321 Friends of Blanche Lincoln Campaign Cmte Date of Disbursement 0 2 0 8 2011 Mailing Address PO Box 3197 City State Zip Code Amount of Each Disbursement this Period Little Rock 72203 AR 2204.70 Purpose of Disbursement Refund of Offset Candidate Name Category/ Friends of Blanche Lincoln Campaign Cmte Type Disbursement For: Office Sought: House Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-3322 NE Victory 2010 Date of Disbursement 0 2 2011 Mailing Address 4900 Dodge Street City State Zip Code Amount of Each Disbursement this Period Omaha NE 68132 1862.67 Purpose of Disbursement Refund of Offset Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: 4057.37 SUBTOTAL of Disbursements This Page (optional) ...

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

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NE NUMBER:	PAGE 8/62
ITEMIZED DISBURSEMENTS	for each category of the	(check o	only one) 22 23 2	24
	Detailed Summary Page	27	28a 28b	28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	TNUC		
Full Name (Last, First, Middle Initial) John Spratt for Congress Cmte			Transaction ID: S	
			08 D D D D D D D D D D D D D D D D D D D	2 0 1 1
Mailing Address P.O. Box 10986			00 02	2011
City Rock Hill	State Zip Code SC 29731		Amount of Each Dis	sbursement this Period
Purpose of Disbursement Refund of Offset		•		11192.88
Candidate Name		Category/		
John Spratt for Congress Cmte  Office Sought: House Disburse	ement For:	Туре		
Senate Sissurate	Primary General			
State: District:	Other (specify)			
Full Name (Last, First, Middle Initial)			Transaction ID: 5	SR21B-3325
Desiree E. Pipkins			Date of Disburseme	
Mailing Address 452 M Street, NW, Apt.	 I		08 0 4	y žo i 1
•	State Zip Code		Amount of Each Dis	sbursement this Period
Washington	DC 20001			-17.00
Purpose of Disbursement Travel Expense				17.00
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate	ement For:			
President	Primary General Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial) Desiree E. Pipkins			Transaction ID: S Date of Disbursement	
Mailing Address 452 M Street, NW, Apt.	<u> </u>		08 / 04	<sup>'</sup> 2011
	State Zip Code		Amount of Each Dis	sbursement this Period
Washington Purpose of Disbursement	DC 20001			-25.00
Airline Baggage Fees				
Candidate Name		Category/ Type		
Office Sought: House Disburse	ement For:	. , , p c		
Senate President	Primary General			
State: District:	Other (specify)			
SUBTOTAL of Disbursements This Page (optional)		b		11150.88

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 9/62
ITEMIZED DISBURSEMENTS	for each category of the	(check only	one)	
	Detailed Summary Page	X 21b 27	22 23 28b 28b	24 25 26 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCC	DUNT		
Full Name (Last, First, Middle Initial) Desiree E. Pipkins			Transaction ID: S Date of Disburseme	
Mailing Address 452 M Street, NW, Apt. 1			$\begin{bmatrix} 0 & 8 & M \\ 0 & 8 & M \end{bmatrix}$	2011
•	State Zip Code DC 20001		Amount of Each Dis	bursement this Period
Purpose of Disbursement Advance Team Stipend				-532.50
Candidate Name		Category/ Type		
Senate President	ment For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) Anie Borja			Transaction ID: S Date of Disburseme	ent
Mailing Address 530 Grand Street, Apt E3	3A		08 / 04	2011
•	State Zip Code NY 10002		Amount of Each Dis	sbursement this Period
Purpose of Disbursement Travel Expense				35.00
Candidate Name		Category/ Type		
Senate President	ment For: Primary General Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial) Anie Borja			Transaction ID: S Date of Disburseme	ent
Mailing Address 530 Grand Street, Apt E3	3A		$\begin{bmatrix} 0 & 8 & M \\ 0 & 8 & M \end{bmatrix}$	y 2011
	State Zip Code NY 10002		Amount of Each Dis	bursement this Period
Purpose of Disbursement Advance Team Stipend		•		600.00
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	1,750		
State: District:	- 5.0. (Sp30ii)) <b>V</b>			
SUBTOTAL of Disbursements This Page (optional) .				102.50

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	-	IE NUMBER:			PA	GE 1	0 / 62	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check of X) 21b 27	nly one) 22 28a	23 28b	П	24 28c	2       2       2		26 30
ny Information copied from such Reports and Statemer for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)									
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCOU	JNT							
Full Name (Last, First, Middle Initial) Mark Critz for Congress Cmte			Transac Date of				3-3330	)	
Mailing Address 647 Main Street, Suite 11	)		0 8 M		) <b>4</b>	/	ž 0	1 1 °	
	tate Zip Code PA 15901		Amount	of Each	Dis	burse	ment th	nis Per	riod
Purpose of Disbursement Refund of Offset			_ L.				432	.14	-
Candidate Name Mark Critz for Congress Cmte		Category/ Type							
Office Sought: House Disburser Senate President State: District:	nent For: Primary ☐ General Other (specify) ▼								
Full Name (Last, First, Middle Initial) Kathy Dahlkemper for Congress			Transac Date of		_		3-333	l	
Mailing Address P.O. Box 1045			0 8 M		) <b>4</b>	/ [	ž o	1 1 Y	]
,	tate Zip Code PA 16512		Amount	of Each	Dis	burse	ment th	nis Per	riod
Purpose of Disbursement Refund of Offset			T L.				432	.14	-
Candidate Name Kathy Dahlkemper for Congress		Category/ Type							
Office Sought: House Disburser Senate President State: District:	nent For: Primary General Other (specify) ▼								
Full Name (Last, First, Middle Initial) Frances F. Denny			<b>Transac</b> Date of				3-3332	2	
Mailing Address 182 E. 95th Street, Apt 2	D		0 8 M	/ <sup>D</sup> O	) <b>4</b>	/ [	ž o	11	
	tate Zip Code NY 10128		Amount	of Each	Dis	burse			riod
Purpose of Disbursement Events-Site Supplies							10	.70	
Candidate Name		Category/ Type							
Office Sought: House Disburser Senate President State: District:	nent For:  Primary General  Other (specify)								
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>					874	.98	
TOTAL This Period (last page this line number only)							-		

В.

C.

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

FOR LINE NUMBER: PAGE 11/62 Use separate schedule(s) (check only one) for each category of the 21b 22 23 24 25 26 Detailed Summary Page 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-3333 Frances F. Denny Date of Disbursement 0 4 0 8 2011 Mailing Address 182 E. 95th Street, Apt 21D City Zip Code State Amount of Each Disbursement this Period New York NY 10128 141.31 Purpose of Disbursement Travel Expense Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-3334 Frances F. Denny Date of Disbursement 0 4 0 8 2011 Mailing Address 182 E. 95th Street, Apt 21D City State Zip Code Amount of Each Disbursement this Period New York 10128 NY 600.00 Purpose of Disbursement Advance Team Stipend Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-3335 RACHEL E. FORDE Date of Disbursement 0 4 2011 Mailing Address 13103 67TH AVE NE City State Zip Code Amount of Each Disbursement this Period ARLINGTON WA 98223 5.11 Purpose of Disbursement **Events-Site Supplies** Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: 746.42 SUBTOTAL of Disbursements This Page (optional) ...  $\blacktriangleright$ 

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

C.

CHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I	
EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 2 28a 28b 28c 29 3
ny Information copied from such Reports and Statem for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -			
Full Name (Last, First, Middle Initial) RACHEL E. FORDE			Transaction ID: SB21B-3336 Date of Disbursement
Mailing Address 13103 67TH AVE NE			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}$
City ARLINGTON	State Zip Code WA 98223		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			97.25
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)	71	
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-3337
RACHEL E. FORDE			Date of Disbursement
Mailing Address 13103 67TH AVE NE			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ 2 & 0 & 1 & 1 \end{smallmatrix} $
City ARLINGTON	State Zip Code WA 98223		Amount of Each Disbursement this Period
Purpose of Disbursement	Г		50.00
Airline Baggage Fees Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)	1,750	
State: District: Full Name (Last, First, Middle Initial)			
RACHEL E. FORDE			Transaction ID: SB21B-3338 Date of Disbursement
Mailing Address 13103 67TH AVE NE			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}$
	State Zip Code WA 98223		Amount of Each Disbursement this Period
Purpose of Disbursement Advance Team Stipend		•	600.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼	7,750	
State: District:			

В.

C.

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 13 / 62
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCC	UNT	
Full Name (Last, First, Middle Initial) Itai I. Grunfeld			Transaction ID: SB21B-3339 Date of Disbursement
Mailing Address 624 N. Virgil Avenue			$\begin{bmatrix} 0 & 8 & M \\ 0 & 8 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 4 \\ 0 & 0 & 4 \end{bmatrix} / \begin{bmatrix} 0 & 0 & 1 & 1 \\ 0 & 2 & 0 & 1 & 1 \end{bmatrix}$
	State Zip Code CA 90004		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			372.97
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Itai I. Grunfeld			Transaction ID: SB21B-3340 Date of Disbursement
Mailing Address 624 N. Virgil Avenue			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}$
•	State Zip Code CA 90004		Amount of Each Disbursement this Period
Purpose of Disbursement			600.00
Advance Team Stipend Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Zaina Javaid			Transaction ID: SB21B-3341 Date of Disbursement
Mailing Address 1234 Massachusetts Ave Apt. 703	., NW		08 7 04 7 2011
	State Zip Code DC 20005		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			158.26
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	· · · · · · · ·		
SUBTOTAL of Disbursements This Page (optional) .			1131.23

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	to and address of any pointed		ion commissions from Such committee
DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) Zaina Javaid			Transaction ID: SB21B-3342 Date of Disbursement
Mailing Address 1234 Massachusetts Av Apt. 703	e., NW		08 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
City Washington	State Zip Code DC 20005		Amount of Each Disbursement this Period
Purpose of Disbursement Advance Team Stipend			800.00
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			Turner and an ID CD04D 0040
Kratovil for Congress			Transaction ID: SB21B-3343 Date of Disbursement
Mailing Address P.O. Box 518			$\begin{bmatrix} 0 & 8 & M \\ 0 & 8 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 4 & 0 \end{bmatrix} / \begin{bmatrix} y & y & y & y \\ 2 & 0 & 1 & 1 \end{bmatrix}$
City Stevensville	State Zip Code MD 21666		Amount of Each Disbursement this Period
Purpose of Disbursement Refund of Offset			2100.00
Candidate Name Kratovil for Congress		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Alexandra Levin			Transaction ID: SB21B-3344 Date of Disbursement
Mailing Address 400 S. Lafayette Street.	Unit 502		$\begin{bmatrix} \begin{smallmatrix} M & R & M \\ O & R & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & A \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & I & I \end{bmatrix}$
City Denver	State Zip Code CO 80209		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			253.84
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)	. ,,,,,	
State: District:			
SUBTOTAL of Disbursements This Page (optional)			3153.84

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: (check only one)	PAGE 15/62
ITEMIZED DISBURSEMENTS	for each category of the	X 21b 22 23 27 28a 28b	24 25 26 28c 29 30b
Any Information copied from such Reports and State or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full)	, решене		
DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACCOUN	IT	
Full Name (Last, First, Middle Initial) Alexandra Levin		Transaction II Date of Disbur	
Mailing Address 400 S. Lafayette Street.	, Unit 502	08 / 0	04 2011
City Denver	State Zip Code CO 80209	Amount of Eac	ch Disbursement this Period
Purpose of Disbursement Advance Team Stipend			800.00
Candidate Name	I I	tegory/ Type	
Office Sought: House Disburs Senate President State: District:	ement For:  Primary General  Other (specify) ▼		
Full Name (Last, First, Middle Initial) MASSACHUSETTS DEMOCRATIC STAT	E COMMITTEE	Date of Disbur	
Mailing Address 77 Summer Street, 10th	Floor	08 / 0	04 7 2011
City Boston	State Zip Code MA 02110	Amount of Eac	ch Disbursement this Period
Purpose of Disbursement Refund of Offset			6180.87
Candidate Name MASSACHUSETTS DEMOCRATIC STAT		tegory/ Гуре	
Senate President	ement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
Onorato for Governor LLC		Date of Disbur	D: SB21B-3347 sement
Mailing Address P.O. Box 23205		08 / 0	04 2011
City Pittsburgh	State Zip Code PA 15222	Amount of Eac	ch Disbursement this Period
Purpose of Disbursement Refund of Offset			1209.22
Candidate Name Onorato for Governor LLC		tegory/ Type	
0// 0 1:			
Office Sought:  Senate  President  State:  Disburs  Disburs  State:	ement For:  Primary General  Other (specify) ▼		

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	7 22
		27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	DUNT	
Full Name (Last, First, Middle Initial) Desiree E. Pipkins			Transaction ID: SB21B-3348 Date of Disbursement
Mailing Address 452 M Street, NW, Apt. 1			$\begin{bmatrix} 0.8 & M & 7 & D & D & 7 & A & A & A & A & A & A & A & A & A$
	State Zip Code DC 20001		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		· · ·	17.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			
Desiree E. Pipkins			Transaction ID: SB21B-3349 Date of Disbursement
Mailing Address 452 M Street, NW, Apt. 1			$\begin{bmatrix} 0.8 & M & 7 & D & D & 7 & A & A & A & A & A & A & A & A & A$
,	State Zip Code DC 20001		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees		· · ·	25.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
Desiree E. Pipkins			Transaction ID: SB21B-3350 Date of Disbursement
Mailing Address 452 M Street, NW, Apt. 1			08
	State Zip Code DC 20001		Amount of Each Disbursement this Period
Purpose of Disbursement			532.50
Advance Team Stipend Candidate Name		Category/	
Office Sought: House Disburse Senate	ment For: Primary General	Туре	
President State: District:	Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	574.50

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

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SCHEDULE B (FEC Form 3X)	lla a a sa sa ta a a la adula (a)	FOR LINE	NUMBER: PAGE 17/	62
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(Crieck only		
	Detailed Summary Page	X 21b 27	22 23 24 25 28a 28b 28c 29	26 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name				s
NAME OF COMMITTEE (In Full)	le and address of any political	Committee to son	cit contributions from such committee	
DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACC	OUNT		
Full Name (Last, First, Middle Initial) JESSE J ROSEN			<b>Transaction ID:</b> SB21B-3351 Date of Disbursement	
Mailing Address 1045 W. County Line Ro	pad		$\begin{bmatrix} \begin{smallmatrix} M & M & M \\ 0 & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 \end{smallmatrix}$	1 Y
City Bayside	State Zip Code WI 53217		Amount of Each Disbursement this	Period
Purpose of Disbursement Travel Expense			349.17	7
Candidate Name		Category/ Type		
Senate President	ement For: Primary General Other (specify)			
State: District: Full Name (Last, First, Middle Initial)				
JESSE J ROSEN			Transaction ID: SB21B-3352 Date of Disbursement	
Mailing Address 1045 W. County Line Ro	pad		$\begin{bmatrix} M & M \\ 0 & 8 \end{bmatrix}$ $\begin{bmatrix} D & D \\ 0 & 4 \end{bmatrix}$ $\begin{bmatrix} Y & Y & Y \\ 2 & 0 & 1 \end{bmatrix}$	1 Y
City Bayside	State Zip Code WI 53217		Amount of Each Disbursement this	Period
Purpose of Disbursement			800.00	Ò
Advance Team Stipend Candidate Name		Category/ Type		
Senate President	ement For:  Primary General  Other (specify) ▼			
State: District: Full Name (Last, First, Middle Initial)			T :: ID ODO4D 0050	
Benjamin Solomon			Transaction ID: SB21B-3353 Date of Disbursement	
Mailing Address 14 Black Birch Road			$\begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} & R \end{smallmatrix} \  \   \begin{smallmatrix} D \\ O \end{smallmatrix} \                   $	1 Y
City Scotch Plains	State Zip Code NJ 07076		Amount of Each Disbursement this	
Purpose of Disbursement			267.67	7
Travel Expense Candidate Name		Category/ Type		
Senate President	ement For:  Primary General  Other (specify)	- 75-0		
State: District:				
SUBTOTAL of Disbursements This Page (optional)			1416.84	1

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SCHEDULE B (FEC Form 3X)		FOR LINE N	NUMBER: PAGE 18 / 62
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
TI EINILEED DIODOTTOLINILINTO	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Stater		by any person fo	r the purpose of soliciting contributions
or for commercial purposes, other than using the name	e and address of any political	committee to soli	cit contributions from such committee
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-3354
Benjamin Solomon			Date of Disbursement
Mailing Address 14 Black Birch Road			$\begin{bmatrix} 0 & 8 & M \\ 0 & 8 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 4 \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 2 & 0 & 1 & 1 \end{bmatrix}$
City Scotch Plains	State Zip Code NJ 07076		Amount of Each Disbursement this Period
Purpose of Disbursement Advance Team Stipend			600.00
Candidate Name		Category/	
		Type	
Office Sought: House Disburs Senate President	ement For:  Primary General  Other (specify)		
State: District:	Care (epocary)		
Full Name (Last, First, Middle Initial) Braley for Congress			Transaction ID: SB21B-3355 Date of Disbursement
Mailing Address P.O. Box 390			08 / 08 / 2011
City Waterloo	State Zip Code IA 50704		Amount of Each Disbursement this Period
Purpose of Disbursement Refund of Offset			3991.73
Candidate Name Braley for Congress		Category/ Type	
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) John Leeper			<b>Transaction ID:</b> SB21B-3356 Date of Disbursement
Mailing Address 9480 Virginia Center Blv	d #9		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & I & I \end{bmatrix}$
City Vienna	State Zip Code VA 22181		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			240.80
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President	ement For:    Primary   General     Other (specify)   \(\bigvert	Турс	
State: District:	· · · · · · · · · · · · · · · · · · ·		
SUBTOTAL of Disbursements This Page (optional)			4832.53

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	for each category of the			PAGE 19 / 62			
	Detailed Summary Page	X 21b 27	22 23 28a 28b	24   25   26 28c   29   30b			
Any Information copied from such Reports and State							
or for commercial purposes, other than using the nar  NAME OF COMMITTEE (In Full)	ne and address of any political	committee to sol	licit contributions fro	om such committee			
DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACC	TNUC					
Full Name (Last, First, Middle Initial) John Leeper			Transaction ID: Date of Disburse				
Mailing Address 9480 Virginia Center Bl	vd #9		08 / 0	8 7 2011			
City Vienna	State Zip Code VA 22181		Amount of Each	Disbursement this Period			
Purpose of Disbursement Advance Team Stipend				600.00			
Candidate Name		Category/ Type					
Senate President	sement For: Primary General Other (specify) ▼						
State: District: Full Name (Last, First, Middle Initial)				00010 0050			
Nicole Lynch			Transaction ID: Date of Disburse				
Mailing Address 7 Avenue A, 2nd Floor			08 / 0	8 2011			
City New York	State Zip Code NY 10009		Amount of Each	Disbursement this Period			
Purpose of Disbursement Travel Expense				70.00			
Candidate Name		Category/ Type					
Senate President	sement For: Primary General Other (specify) ▼						
State: District:							
Full Name (Last, First, Middle Initial) Nicole Lynch			Transaction ID: Date of Disburse	ement			
Mailing Address 7 Avenue A, 2nd Floor			0 8 0	8 / 2011			
City New York	State Zip Code NY 10009		Amount of Each	Disbursement this Period			
Purpose of Disbursement Advance Team Stipend				700.00			
Candidate Name		Category/ Type					
Office Sought: House Disbur. Senate President	sement For: Primary General Other (specify)	1 300					
State: District:							

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age# 11932457837							
SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	IE NUMBER: PAGE 20 / 62				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b	22 23 24 25 26				
		27	28a 28b 28c 29 30b				
Any Information copied from such Reports and State or for commercial purposes, other than using the nan							
NAME OF COMMITTEE (In Full)							
DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACCC	DUNT					
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-3360				
Jaime Moore			Date of Disbursement				
Mailing Address 1451 Walz Avenue			$ \begin{bmatrix} M & M \\ 0 & 8 \end{bmatrix} \begin{bmatrix} D & D \\ 0 & 8 \end{bmatrix} \begin{bmatrix} Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix} $				
City Glenwood Springs	State Zip Code CO 81601		Amount of Each Disbursement this Period				
Purpose of Disbursement Advance Team Stipend			600.00				
Candidate Name		Category/					
		Туре					
	sement For:  Primary General						
Senate President	Primary General Other (specify) ▼						
State: District:	(-p ), V						
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-3361				
Perriello for Congress			Date of Disbursement				
Mailing Address P.O. Box 306			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}$				
City Ivy	State Zip Code VA 22945		Amount of Each Disbursement this Period				
Purpose of Disbursement			6538.21				
Refund of Offset  Candidate Name		Catanami					
Perriello for Congress		Category/ Type					
Office Sought: House Disburs Senate	sement For:  Primary General						
President	Other (specify)						
State: District:							
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-3362				
Scott Pollard			Date of Disbursement				
Mailing Address 1504 Twilight Ridge			08 / 08 / 2011				
City Austin	State Zip Code TX 78746		Amount of Each Disbursement this Period				
Purpose of Disbursement Events-Site Supplies		· · ·	13.25				
Candidate Name		Category/					
Office Sought: House Disburs	sement For:	Туре					
Senate	Primary General						
State: President State:	Other (specify)						
<u>'</u>		-					
SUBTOTAL of Disbursements This Page (optional)			7151.46				

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# **SCHEDULE B (FEC Form 3X)**

FOR LINE NUMBER: PAGE 21/62 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b 22 23 24 25 26 Detailed Summary Page 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-3363 Scott Pollard Date of Disbursement 0 8 08 2011 Mailing Address 1504 Twilight Ridge City State Zip Code Amount of Each Disbursement this Period TX 78746 Austin 36.00 Purpose of Disbursement Travel Expense Candidate Name Category/ Type Office Sought: Disbursement For: House Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-3364 Scott Pollard Date of Disbursement 0 8 08 2011 Mailing Address 1504 Twilight Ridge City State Zip Code Amount of Each Disbursement this Period Austin 78746 TΧ 25.00 Purpose of Disbursement Airline Baggage Fees Candidate Name Category/ Туре Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-3365 Scott Pollard Date of Disbursement 08 2011 Mailing Address 1504 Twilight Ridge City State Zip Code Amount of Each Disbursement this Period Austin TX 78746 500.00 Purpose of Disbursement Advance Team Stipend Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District:

SUBTOTAL of Disbursements This Page (optional) ...

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

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SCHEDULE B (FEC Form 3X)		1	
•	Use separate schedule(s) for each category of the	FOR LINE (check only	
ITEMIZED DISBURSEMENTS	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) JESSE J ROSEN			Transaction ID: SB21B-3366 Date of Disbursement
Mailing Address 1045 W. County Line Ro	ad		08 08 7 08 7 2011
	State Zip Code WI 53217		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			125.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) JESSE J ROSEN			Transaction ID: SB21B-3367 Date of Disbursement
Mailing Address 1045 W. County Line Ro	ad		$\begin{bmatrix} 0.8 & M \\ 0.8 & M \end{bmatrix} / \begin{bmatrix} 0.0 & D \\ 0.0 & B \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2.0 & 1.1 & Y \end{bmatrix}$
City Bayside	State Zip Code WI 53217		Amount of Each Disbursement this Period
Purpose of Disbursement Advance Team Stipend		• •	400.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Roy Sherman			Transaction ID: SB21B-3368 Date of Disbursement
Mailing Address 1020 SE 5th Avenue			$\begin{bmatrix} \begin{smallmatrix} M & 8 & M \\ 0 & 8 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{smallmatrix} \end{bmatrix}$
	State Zip Code FL 33060		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			19.07
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
SURTOTAL of Dishursements This Page (ontional)			544.07

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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 (check only	
		27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	DUNT	
Full Name (Last, First, Middle Initial) Roy Sherman			Transaction ID: SB21B-3369 Date of Disbursement
Mailing Address 1020 SE 5th Avenue			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ 2 & O & 1 & 1 \end{smallmatrix} $
	State Zip Code FL 33060		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			25.00
Candidate Name		Category/ Type	
Office Sought:  Senate President State:  Disburse	ment For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			ODO4D 0070
Roy Sherman			Transaction ID: SB21B-3370 Date of Disbursement
Mailing Address 1020 SE 5th Avenue			$\begin{bmatrix}\begin{smallmatrix}M\\O\end{smallmatrix}8^M&\\&&&\end{bmatrix}^{\prime}\begin{bmatrix}\begin{smallmatrix}D\\O\end{smallmatrix}8^D&\\&&&&\\&&&&\\&&&&\\&&&&\\&&&&\\&&&&\\&&&&\\$
	State Zip Code FL 33060		Amount of Each Disbursement this Period
Purpose of Disbursement	33000		500.00
Advance Team Stipend Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Abbey Watson			Transaction ID: SB21B-3371 Date of Disbursement
Mailing Address 512B 6th Street, SE			$\begin{bmatrix} \begin{smallmatrix} M & 8 \\ O & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & O \\ O & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}$
	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			56.50
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	Carior (opcony)		
SUBTOTAL of Disbursements This Page (optional) .			581.50

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SCHEDULE B (FEC Form 3X)	CHEDULE B (FEC Form 3X)			PAGE 24/62
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one) ] 22   ] 23   ]	24
	Detailed Summary Page	27	28a 28b	28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	DUNT		
/				
Full Name (Last, First, Middle Initial) Abbey Watson			Transaction ID: S Date of Disburseme	ent
Mailing Address 512B 6th Street, SE			08 / 08	Y ŽO I I
City Washington	State Zip Code DC 20003		Amount of Each Dis	sbursement this Period
Purpose of Disbursement Advance Team Stipend				600.00
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) Abbey Watson			Transaction ID: S Date of Disburseme	ent
Mailing Address 512B 6th Street, SE			08 / 08	2011
City Washington	State Zip Code DC 20003		Amount of Each Dis	sbursement this Period
Purpose of Disbursement Advance Team Stipend				600.00
Candidate Name		Category/ Type		
Senate President	ement For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) Noam Bar-Zemer			Transaction ID: S Date of Disburseme	ent
Mailing Address 15 Laurel Court			08 / 17	2011
City Providence	State Zip Code RI 02906		Amount of Each Dis	sbursement this Period
Purpose of Disbursement Advance Team Stipend			<u> </u>	500.00
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	Турс		
State: District:				
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>		1700.00

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SCHEDULE B (FEC Form 3X)		FORLINE	NUMBER. DAGE OF CO.
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	
II LWIZLD DISBONSLWLN IS	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-3380
Patrick Bauer			Date of Disbursement
Mailing Address 82 Sea Cliff Avenue			08
City Sea Cliff	State Zip Code NY 11579		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		•	232.50
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	7,75	
State: District:	Caron (openny) 🔻		
Full Name (Last, First, Middle Initial) Patrick Bauer			Transaction ID: SB21B-3381 Date of Disbursement
Mailing Address 82 Sea Cliff Avenue			$\begin{bmatrix} 0 & 8 & M \\ 0 & 8 & M \end{bmatrix} / \begin{bmatrix} 0 & 1 & D \\ 1 & 7 & 7 \end{bmatrix} / \begin{bmatrix} 1 & 1 & 1 & 1 \\ 2 & 2 & 0 & 1 & 1 \end{bmatrix}$
City Sea Cliff	State Zip Code NY 11579		Amount of Each Disbursement this Period
Purpose of Disbursement Advance Team Stipend		-	700.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		
State: District:	-		
Full Name (Last, First, Middle Initial) Kathryn Edwards			Transaction ID: SB21B-3382 Date of Disbursement
Mailing Address 1062 Hillcrest Drive			08
City Troy	State Zip Code OH 45373		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			50.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
SURTOTAL of Dichursements This Page (ontional)			982.50

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	one)
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		by any person for	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	DUNT	
Full Name (Last, First, Middle Initial) Kathryn Edwards			Transaction ID: SB21B-3383 Date of Disbursement
Mailing Address 1062 Hillcrest Drive			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & B \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & T \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ D & D & T \end{smallmatrix} \end{bmatrix} $
	State Zip Code OH 45373		Amount of Each Disbursement this Period
Purpose of Disbursement Advance Team Stipend			600.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼		
State: District:  Full Name (Last, First, Middle Initial)			
Kathryn Edwards			Transaction ID: SB21B-3384  Date of Disbursement
Mailing Address 1062 Hillcrest Drive			$\begin{bmatrix} \begin{smallmatrix} M & 8 \\ O & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 1 & D \\ I & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ 2 & 0 & 1 & 1 \end{smallmatrix} \end{bmatrix}$
•	State Zip Code OH 45373		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			25.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Kathryn Edwards			Transaction ID: SB21B-3385 Date of Disbursement
Mailing Address 1062 Hillcrest Drive			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & S \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & T \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ D & D & T \end{smallmatrix} \end{bmatrix} \ Y$
	State Zip Code OH 45373		Amount of Each Disbursement this Period
Purpose of Disbursement Advance Team Stipend			600.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	· · · · · · · · · · · · · · · · · · ·		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	1225.00

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

SCHEDULE B (FEC Form 3X)		rate schedule(s)		OR LINI			:		PAG	GE 27/	62	_
TEMIZED DISBURSEMENTS		category of the Summary Page	X	_	<u> </u>	22 28a	23 28b		24 28c	25 29	E	26 30
Any Information copied from such Reports and Statem												
r for commercial purposes, other than using the name	e and addres	ss of any political	commi	ttee to s	Olicit	contric	outions tr	om s	such co	ommittee		
NAME OF COMMITTEE (In Full)  DEMOCRATIC NATIONAL COMMITTEE -	- TRAVEL (	OFFSET ACC	TNUC	-								
Full Name (Last, First, Middle Initial) Harvey Greene							ction ID: Disburs	_		-3386		
Mailing Address 7589 NW 117TH LANE						0 <sup>M</sup> 8 <sup>M</sup>	/ D	7	/ Y	ž 0 1	1 Y	
	State	Zip Code			A	moun	t of Each	Dis	burser	nent this	Perio	od
	FL	33076			[		•		•	112.0	1	
Purpose of Disbursement Travel Expense			,	-	L	-				113.0	I	_
Candidate Name			Cate	gory/ pe								
Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spec	General cify) ▼										
Full Name (Last, First, Middle Initial)					_		atian ID		DO4D	0007		_
Harvey Greene							Ction ID: Disburs	eme			V	
Mailing Address 7589 NW 117TH LANE					L	0 8	] 1	7	, L	2 0 1	1	
	State FL	Zip Code 33076			A	moun	t of Each	Dis	burser	nent this	Perio	bd
Purpose of Disbursement	1 -	33070			+ [					600.0	0	
Advance Team Stipend			١.	.	1 -							
Candidate Name			Cate Ty	gory/ pe								
Office Sought: House Senate President State: District:	ement For: Primary Other (spec	General cify) ▼										
Full Name (Last, First, Middle Initial) John Leeper							ction ID:			-3388		
Mailing Address 9480 Virginia Center Blvd	d #9					0 <sup>M</sup> 8 <sup>M</sup>	/ D	7	/ Y	2 0 1	1 Y	
	State	Zip Code			А	moun	t of Each	Dis	burser	nent this	Perio	od
	VA	22181			Г		•			359.5	0	
Purpose of Disbursement Travel Expense					L	-				339.3	٥ ا	_
Candidate Name			Cate	gory/ pe								
Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spec	General cify) ▼										
SUBTOTAL of Disbursements This Page (optional)				<u> </u>		·				1072.5	9	_
TOTAL This Period (last page this line number only)	)			•								
E6AN026						FEC	Schedu	le B	( Forn	n 3X) (Re	evise	d 0

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SCHEDULE B (FEC Form 3X)		FOR LINE 1	NUMBER: PAGE 28 / 62
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Staten			
or for commercial purposes, other than using the nam  NAME OF COMMITTEE (In Full)	e and address of any political	committee to soil	cit contributions from such committee
DEMOCRATIC NATIONAL COMMITTEE	TRAVEL OFFSET ACC	TNUC	
Full Name (Last, First, Middle Initial) John Leeper			Transaction ID: SB21B-3389 Date of Disbursement
Mailing Address 9480 Virginia Center Blv	d #9		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & S \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & T \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ D & D & T \end{smallmatrix} \end{bmatrix} $
City Vienna	State Zip Code VA 22181		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			10.00
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) John Leeper			Transaction ID: SB21B-3390 Date of Disbursement
Mailing Address 9480 Virginia Center Blv	d #9		$ \begin{bmatrix} 0 & 8 & M \\ 0 & 8 & M \end{bmatrix} $ $ \begin{bmatrix} 0 & 1 & 7 \\ 0 & 1 & 7 \end{bmatrix} $ $ \begin{bmatrix} 0 & 1 & 7 \\ 0 & 2 & 0 & 1 & 1 \end{bmatrix} $
City Vienna	State Zip Code VA 22181		Amount of Each Disbursement this Period
Purpose of Disbursement Advance Team Stipend		0 0	600.00
Candidate Name		Category/ Type	
Office Sought: House Disbursi Senate President	ement For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) GREG MAYS			Transaction ID: SB21B-3391 Date of Disbursement
Mailing Address PO BOX 25153			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & B \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & T \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & T & T \end{bmatrix} $
City WASHINGTON	State Zip Code DC 20007		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			20.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For:  Primary General  Other (specify)	Nr. 2	
State: District:	<del>V</del>		
SUBTOTAL of Disbursements This Page (optional)			630.00

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ago# 11002101010			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	
		27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCC	DUNT	
Full Name (Last, First, Middle Initial) GREG MAYS			Transaction ID: SB21B-3392 Date of Disbursement
Mailing Address PO BOX 25153			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & S \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ D & T \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ D & D & T \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ D & D & T \end{smallmatrix} \end{bmatrix} $
	State Zip Code DC 20007		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			50.00
Candidate Name		Category/ Type	
Office Sought:  Senate President State:  Disburse	ment For: Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial)			T ID CD04D 0000
GREG MAYS			Transaction ID: SB21B-3393 Date of Disbursement
Mailing Address PO BOX 25153			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & R \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & 1 & D \\ 1 & 7 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{smallmatrix} \end{bmatrix} $
•	State Zip Code DC 20007		Amount of Each Disbursement this Period
Purpose of Disbursement Advance Team Stipend			300.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
Chris Mussett			Transaction ID: SB21B-3394 Date of Disbursement
Mailing Address 3814 Washington Avenue	9		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & B \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & T \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ D & D & T \end{smallmatrix} \end{bmatrix} \ Y$
	State Zip Code IA 50310		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			44.15
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	<b>Varior</b> (Specify) <b>▼</b>		
SUBTOTAL of Disbursements This Page (optional) .			394.15

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

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age# 11932437047			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam		by any person fo	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACCO	DUNT	
Full Name (Last, First, Middle Initial) Chris Mussett			Transaction ID: SB21B-3395 Date of Disbursement
Mailing Address 3814 Washington Avenu	ie		08
City Des Moines	State Zip Code IA 50310		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees Candidate Name		Category/	50.00
Office Sought: House Disburse Senate President State: District:	ement For:  Primary General  Other (specify)	Туре	
Full Name (Last, First, Middle Initial) Chris Mussett			Transaction ID: SB21B-3396 Date of Disbursement
Mailing Address 3814 Washington Avenu	ie		$\begin{bmatrix} \begin{smallmatrix} M & 8 & M \\ 0 & 8 & M \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 7 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}$
City Des Moines	State Zip Code IA 50310		Amount of Each Disbursement this Period
Purpose of Disbursement Advance Team Stipend Candidate Name		Category/	700.00
Office Sought: House Disburse Senate President State: District:	ement For:  Primary General  Other (specify)	Туре	
Full Name (Last, First, Middle Initial) Evelyn Marie Prentice			<b>Transaction ID:</b> SB21B-3397 Date of Disbursement
Mailing Address 634 Kling Street, Apt A			$\begin{bmatrix}\begin{smallmatrix}M&8&M\\0&8&\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&1&D\\1&7\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y\\2&0&1&1\end{smallmatrix}$
City Akron	State Zip Code OH 44311		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			107.60
Candidate Name		Category/ Type	
Office Sought: House Disbursi Senate President	ement For: Primary General Other (specify)		
State: District:	·		
SUBTOTAL of Disbursements This Page (optional)			857.60

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

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age# 11932437040			
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)    X   21b	26 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam		y any person for the purpose of soliciting contributions	1002
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	TRAVEL OFFSET ACCOL	UNT	
Full Name (Last, First, Middle Initial) Evelyn Marie Prentice  Mailing Address 634 Kling Street, Apt A		Transaction ID: SB21B-3398 Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 634 Kling Street, Apt A  City Akron  Purpose of Disbursement	State Zip Code OH 44311	Amount of Each Disbursement this Peri	1
Advance Team Stipend Candidate Name  Office Sought: House Disburse	ement For:	Category/ Type	
Senate President State: District:	Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) Evelyn Marie Prentice  Mailing Address 634 Kling Street, Apt A		Transaction ID: SB21B-3399 Date of Disbursement  M M M / D D D / Y Y Y O Y 1	
City Akron	State Zip Code OH 44311	Amount of Each Disbursement this Peri	iod
Purpose of Disbursement Advance Team Stipend Candidate Name		Category/ Type	
Office Sought:    House   Disburse     Senate     President     State: District:	ement For: Primary General Other (specify)	7	
Full Name (Last, First, Middle Initial) Bruce Prunty		Transaction ID: SB21B-3400 Date of Disbursement	
Mailing Address 8324 Mullen		08 7 7 7 7 2011	
City Lenexa	State Zip Code KS 66215	Amount of Each Disbursement this Peri	iod
Purpose of Disbursement Travel Expense Candidate Name		Category/	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	Type	
State: District:			
SUBTOTAL of Disbursements This Page (optional)		▶ 832.64	

S	CHEDULE B (FEC Form 3X)	Use separate schedule(s) for each category of the Detailed Summary Page				NUMBER: PAGE 32 / 62							
T	EMIZED DISBURSEMENTS			X	eck onl 21b 27	22 28a		23 28b		24 28c	В	25 29	
	ly Information copied from such Reports and Staten for commercial purposes, other than using the nam												s
	NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -												
Α.	Full Name (Last, First, Middle Initial) Bruce Prunty					_		ion ID		SB21I	3-34	101	
	Mailing Address 8324 Mullen					0 <sup>M</sup> 8	М	/ D	1 <sup>D</sup>	2 / [	ž	0 Ť	1 Y
	City Lenexa	State Zip Code KS 66215				Amou	ınt c	f Each	n Di	isburse			
	Purpose of Disbursement Advance Team Stipend			-			-				3	00.00	) )
	Candidate Name		С	ateg Typ	,								
	Senate President	ement For: Primary General Other (specify)											
_	State: District:												
В.	Full Name (Last, First, Middle Initial) GLEN RYNIEWSKI						of D	isburs	em				V
	Mailing Address 6104 W. HENDERSON					0 8	М	/ D	1 7		Ž	0 Ť	1 1
	City CHICAGO	State Zip Code IL 60634				Amou	ınt c	f Each	n Di	isburse			
	Purpose of Disbursement Travel Expense Candidate Name					L.	0			•		82.0	)
	Candidate Name		U.	ateg Typ									
	Senate President	ement For: Primary General Other (specify)											
 C.	State: District:  Full Name (Last, First, Middle Initial)  GLEN RYNIEWSKI							ion ID		SB21I	3-34	103	
	Mailing Address 6104 W. HENDERSON					0 <sup>M</sup> 8	М	/ D	1 7	? / [	Ž	0 Ť	1 Y
	City CHICAGO	State Zip Code IL 60634				Amou	ınt c	f Each	n Di	isburse			
	Purpose of Disbursement Airline Baggage Fees					<u> </u>	_			•	-	50.0	) )
	Candidate Name			ateg Typ									
	Senate President	ement For: Primary General Other (specify)											
_	State: District:												
_ 5	SUBTOTAL of Disbursements This Page (optional)										43	32.0	)
1	OTAL This Period (last page this line number only)				•								

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

FOR LINE NUMBER: PAGE 33 / 62 Use separate schedule(s) (check only one) for each category of the 21b 22 23 24 25 26 Detailed Summary Page 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-3404 **GLEN RYNIEWSKI** Date of Disbursement 0 8 2011 Mailing Address 6104 W. HENDERSON City State Zip Code Amount of Each Disbursement this Period **CHICAGO** 60634 IL 600.00 Purpose of Disbursement Advance Team Stipend Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-3405 **GLEN RYNIEWSKI** Date of Disbursement 0 8 2011 Mailing Address 6104 W. HENDERSON City State Zip Code Amount of Each Disbursement this Period **CHICAGO** 60634 IL 253.83 Purpose of Disbursement Car Rental Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-3406 Bradford A. Simmons Date of Disbursement 2011 Mailing Address 6310 Mossway City State Zip Code Amount of Each Disbursement this Period Baltimore MD 21212 55.00 Purpose of Disbursement Travel Expense Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: 908.83 SUBTOTAL of Disbursements This Page (optional) ....  $\blacktriangleright$ 

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

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SCHEDULE B (FEC Form 3X)		FOR LINE N	HIMDED: DAOF 04/00
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem		by any person fo	r the purpose of soliciting contributions
or for commercial purposes, other than using the name	e and address of any political of	committee to solid	cit contributions from such committee
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCC	DUNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-3407
Bradford A. Simmons			Date of Disbursement
Mailing Address 6310 Mossway			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & R \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & T \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ D & D & T \end{smallmatrix} \end{bmatrix} $
,	State Zip Code MD 21212		Amount of Each Disbursement this Period
Purpose of Disbursement Advance Team Stipend			300.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate	ment For: Primary General		
President State: District:	Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			Transportion ID. CD01D 0400
Abbey Watson			Transaction ID: SB21B-3408 Date of Disbursement
Mailing Address 512B 6th Street, SE			$\begin{bmatrix} \begin{smallmatrix} M & M \\ D & M \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & T \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & D & T & T \end{smallmatrix} \end{bmatrix} $
,	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement			600.00
Advance Team Stipend Candidate Name		Category/	
Office Sought:  Senate President State:  Disburse	ment For: Primary General Other (specify)	Туре	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-3409
WHITE HOUSE AIRLIFT OPERATIONS			Date of Disbursement
Mailing Address 1600 Pennsylvania Aven EEOB Room #25	ue, NW		08 7 17 7 2011
City	State Zip Code DC 20502		Amount of Each Disbursement this Period
Purpose of Disbursement White House Airlift In-flight Services			49.48
Candidate Name		Category/	
Office Sought: House Disburse	ment For:	Туре	
Senate	Primary General		
State: President State:	Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional) .			949.48

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check on	E NUMBER:	PAGE 35 / 62		
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 28b 28b	24 25 26 28c 29 30b		
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full)	and address of any pointed		onon contributions from c			
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT				
Full Name (Last, First, Middle Initial) WHITE HOUSE AIRLIFT OPERATIONS			Transaction ID: S Date of Disbursemen			
Mailing Address 1600 Pennsylvania Aven EEOB Room #25	ue, NW		08 / 17	2011		
	State Zip Code DC 20502		Amount of Each Disl	oursement this Period		
Purpose of Disbursement White House Airlift Helo				589.50		
Candidate Name		Category/ Type				
Senate President	ment For: Primary General Other (specify) ▼					
State: District:						
Full Name (Last, First, Middle Initial) WHITE HOUSE AIRLIFT OPERATIONS			Transaction ID: S Date of Disbursemen	nt		
Mailing Address 1600 Pennsylvania Aven EEOB Room #25			08 / 17	2011		
•	State Zip Code DC 20502		Amount of Each Disl	bursement this Period		
Purpose of Disbursement White House Airlift Airfare			l	6189.37		
Candidate Name		Category/ Type				
Senate President	ment For: Primary General Other (specify)					
State: District:						
Full Name (Last, First, Middle Initial) WHITE HOUSE AIRLIFT OPERATIONS			Transaction ID: S Date of Disbursemen	nt		
Mailing Address 1600 Pennsylvania Aven EEOB Room #25	ue, NW		08 / 17	y yo y 1 y		
	State Zip Code DC 20502		Amount of Each Disl	bursement this Period		
Purpose of Disbursement White House Airlift Airfare				4278.46		
Candidate Name		Category/ Type				
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	. 140				
State: District:	, (1 )/ <del>V</del>					
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>		11057.33		

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) WHITE HOUSE AIRLIFT OPERATIONS			Transaction ID: SB21B-3413 Date of Disbursement
Mailing Address 1600 Pennsylvania Aven EEOB Room #25	ue, NW		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & B \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & T \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ D & D \end{smallmatrix} \end{bmatrix} $
,	State Zip Code DC 20502		Amount of Each Disbursement this Period
Purpose of Disbursement White House Airlift Helo			753.64
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:  Full Name (Last, First, Middle Initial)  WHITE HOUSE AIRLIFT OPERATIONS			Transaction ID: SB21B-3414 Date of Disbursement
Mailing Address 1600 Pennsylvania Aven EEOB Room #25	ue, NW		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & B \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & T \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ D & D \end{smallmatrix} \end{bmatrix} $
City Washington	State Zip Code DC 20502		Amount of Each Disbursement this Period
Purpose of Disbursement White House Airlift In-flight Services			89.17
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	· · · · · · · · · · · · · · · · · · ·		
Full Name (Last, First, Middle Initial) WHITE HOUSE AIRLIFT OPERATIONS			Transaction ID: SB21B-3415 Date of Disbursement
Mailing Address 1600 Pennsylvania Aven EEOB Room #25	ue, NW		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & S \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ D & T \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ Z & O & T & T \end{bmatrix} \   \end{bmatrix}$
	State Zip Code DC 20502		Amount of Each Disbursement this Period
Purpose of Disbursement White House Airlift In-flight Services			86.81
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
SURTOTAL of Dishursements This Page (ontional)			929.62

C.

SCHEDULE B (FEC Form 3X)			
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		d by any person fo	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , , , ,		
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) WHITE HOUSE AIRLIFT OPERATIONS			Transaction ID: SB21B-3416 Date of Disbursement
Mailing Address 1600 Pennsylvania Aven EEOB Room #25	ue, NW		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & B \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & T \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ D & D \end{smallmatrix} \end{bmatrix} $
	State Zip Code DC 20502		Amount of Each Disbursement this Period
Purpose of Disbursement White House Airlift Airfare			16281.21
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) WHITE HOUSE AIRLIFT OPERATIONS			Transaction ID: SB21B-3417 Date of Disbursement
Mailing Address 1600 Pennsylvania Aven EEOB Room #25	ue, NW		$ \begin{bmatrix} M & M \\ 0 & 8 \end{bmatrix}  \begin{bmatrix} D & 1 & 7 \\ 1 & 7 \end{bmatrix}  \begin{bmatrix} Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix} $
,	State Zip Code DC 20502		Amount of Each Disbursement this Period
Purpose of Disbursement White House Airlift In-flight Services			33.24
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) WHITE HOUSE AIRLIFT OPERATIONS			Transaction ID: SB21B-3418 Date of Disbursement
Mailing Address 1600 Pennsylvania Aven EEOB Room #25	ue, NW		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & T \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}$
City	State Zip Code DC 20502		Amount of Each Disbursement this Period
Purpose of Disbursement White House Airlift Helo			1071.44
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
SURTOTAL of Dishursements This Page (ontional)			17385.89

C.

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 38 / 62
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)	c and address of any pointed	T COMMITTALE CO SOM	on communicia nom such commune
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) WHITE HOUSE AIRLIFT OPERATIONS			Transaction ID: SB21B-3419 Date of Disbursement
Mailing Address 1600 Pennsylvania Aven EEOB Room #25	ue, NW		$\begin{bmatrix} M & M \\ 0 & 8 \end{bmatrix} / \begin{bmatrix} D & D \\ 1 & 7 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}$
City Washington	State Zip Code DC 20502		Amount of Each Disbursement this Period
Purpose of Disbursement White House Airlift Airfare			10929.60
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			Turn and in IR CD01B 0400
WHITE HOUSE AIRLIFT OPERATIONS			Transaction ID: SB21B-3420 Date of Disbursement
Mailing Address 1600 Pennsylvania Aven EEOB Room #25	ue, NW		08 7 7 7 7 2 0 1 1
City Washington	State Zip Code DC 20502		Amount of Each Disbursement this Period
Purpose of Disbursement White House Airlift In-flight Services			9.92
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			ODO/D 0/0/
WHITE HOUSE AIRLIFT OPERATIONS			Transaction ID: SB21B-3421 Date of Disbursement
Mailing Address 1600 Pennsylvania Aven EEOB Room #25	ue, NW		0 8 M / D D / Y 2 0 1 1 Y
City Washington	State Zip Code DC 20502		Amount of Each Disbursement this Period
Purpose of Disbursement White House Airlift Helo			97.08
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	. 1900	
State: District:			
SUBTOTAL of Disbursements This Page (optional)			11036.60

C.

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 39 / 62
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-3422
WHITE HOUSE AIRLIFT OPERATIONS			Date of Disbursement    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
Mailing Address 1600 Pennsylvania Aveni EEOB Room #25	ue, NW		$\begin{bmatrix} 0.8 & M \\ 0.8 & M \end{bmatrix} / \begin{bmatrix} D & D & D \\ 1.7 & D & M \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2.0 & 1.1 & M \end{bmatrix}$
	State Zip Code DC 20502		Amount of Each Disbursement this Period
Purpose of Disbursement White House Airlift Airfare		•	492.64
Candidate Name		Category/	
000	and Fam	Туре	
Office Sought: House Disburse Senate	ment For:  Primary  General		
President State: District:	Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-3423
WHITE HOUSE AIRLIFT OPERATIONS			Date of Disbursement
Mailing Address 1600 Pennsylvania Avenu EEOB Room #25	ue, NW		$\begin{bmatrix} \begin{smallmatrix} M & 8 & M \\ 0 & 8 & M \end{smallmatrix} & / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 7 \end{smallmatrix} \end{bmatrix} & / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}^{Y} \end{bmatrix}$
•	State Zip Code DC 20502		Amount of Each Disbursement this Period
Purpose of Disbursement	20002	0 0	27.07
White House Airlift In-flight Services Candidate Name		Category/	
		Type	
Office Sought: House Disburse Senate	ment For:    Primary   General		
President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) WHITE HOUSE AIRLIFT OPERATIONS			Transaction ID: SB21B-3424 Date of Disbursement
Mailing Address 1600 Pennsylvania Aveni	ue. NW		$\begin{bmatrix}\begin{smallmatrix}M&M&M\\0&8\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&1&D\\1&7\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y\\2&0&1&1\end{smallmatrix}\end{bmatrix}$
EEOB Room #25			
	State Zip Code DC 20502		Amount of Each Disbursement this Period
Purpose of Disbursement White House Airlift Airfare			1475.12
Candidate Name		Category/	
Office Sought: House Disburse	ment For:	Туре	
Senate	Primary General		
President State: District:	Other (specify)		
5.55.			
SUBTOTAL of Disbursements This Page (optional) .			1994.83

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SCHEDULE B (FEC Form 3X)				
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check on X 21b 27	22 23 28b	24 25 26 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)	e and address of any political	COMMITTEE TO SE	Sicil Continuations from s	such committee
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT		
Full Name (Last, First, Middle Initial) WHITE HOUSE AIRLIFT OPERATIONS			Transaction ID: S Date of Disbursemen	
Mailing Address 1600 Pennsylvania Aven EEOB Room #25	ue, NW		08 / 17	2011
	State Zip Code DC 20502		Amount of Each Disk	bursement this Period
Purpose of Disbursement White House Airlift In-flight Services				74.18
Candidate Name		Category/ Type		
Senate President	ment For: Primary General Other (specify)			
State: District: Full Name (Last, First, Middle Initial)				
WHITE HOUSE AIRLIFT OPERATIONS			Transaction ID: S Date of Disbursemen	nt
Mailing Address 1600 Pennsylvania Aven EEOB Room #25			08 / 17	2011
,	State Zip Code DC 20502		Amount of Each Disl	bursement this Period
Purpose of Disbursement White House Airlift Helo				1300.38
Candidate Name		Category/ Type		
Senate President	ment For: Primary General Other (specify)			
State: District: Full Name (Last, First, Middle Initial)			_	
WHITE HOUSE AIRLIFT OPERATIONS			Transaction ID: S Date of Disbursemen	nt
Mailing Address 1600 Pennsylvania Aven EEOB Room #25	ue, NW		08 / 17	<sup>Y</sup> 20111
	State Zip Code DC 20502		Amount of Each Disl	bursement this Period
Purpose of Disbursement White House Airlift Airfare				4944.54
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	. ) ۲۰۰		
State: District:	· · · · · · · · · · · · · · · · · · ·			
SUBTOTAL of Disbursements This Page (optional) .				6319.10

C.

age# 11932457858			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	rone) 22 23 24 25 26
A 17 11 11 12 1 12 1		27	28a 28b 28c 29 30b
Any Information copied from such Reports and State or for commercial purposes, other than using the nan			
NAME OF COMMITTEE (In Full)			
DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACCO	UNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-3462
AMERICAN EXPRESS			Date of Disbursement
Mailing Address P O BOX 1270			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 8 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ 1 & 7 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix} \ $
City NEWARK	State Zip Code NJ 07101		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Agent fee	10 0,101		635.00
Candidate Name	L	Category/	
		Type	
Senate President	ement For: Primary General Other (specify)		See Attached Memo Entry
State: District:			
Full Name (Last, First, Middle Initial) Travel Agency Service			<b>Transaction ID:</b> SB21B-3462-10000 Date of Disbursement
Mailing Address 3415 E Kiehl Ave			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & R \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & T \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & I & Y \\ Z & O & I & I \end{smallmatrix} \end{bmatrix}$
City Little Rock	State Zip Code AR 72205		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Agent fee		•	635.00
Candidate Name	L.	Category/ Type	IMEMO ITEMI
Senate President	ement For: Primary General Other (specify)		[MEMO ITEM] Memo Entry
State: District: Full Name (Last, First, Middle Initial)			
AMERICAN EXPRESS			Transaction ID: SB21B-3463 Date of Disbursement
Mailing Address P O BOX 1270			$\begin{bmatrix} \begin{smallmatrix} M & M \\ D & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & D & 1 & 1 \end{bmatrix} $
City NEWARK	State Zip Code NJ 07101		Amount of Each Disbursement this Period
Purpose of Disbursement Airfare			15166.70
Candidate Name	,	Category/ Type	
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)		See Attached Memo Entry
State: District:			
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	15801.70

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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 42/62
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
The management of the state of	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem		by any person f	for the purpose of soliciting contributions
or for commercial purposes, other than using the name	e and address of any political of	committee to so	licit contributions from such committee
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	TINIT	
DEMOGRATION WITHOUT GOMINITTEE	111/1/22 011 021 71000	30111	
Full Name (Last, First, Middle Initial) American Airlines			<b>Transaction ID:</b> SB21B-3463-10000
American Amines			Date of Disbursement  O 8
Mailing Address 4333 Amon Carter Boule	vard		$\begin{bmatrix} 0 & 8 & M \\ 0 & 8 & M \end{bmatrix} / \begin{bmatrix} 0 & 1 & 7 \\ 1 & 7 & 7 \end{bmatrix} / \begin{bmatrix} 0 & 1 & 1 & 1 \\ 2 & 0 & 1 & 1 \end{bmatrix}$
City Fort Worth	State Zip Code TX 76155		Amount of Each Disbursement this Period
Purpose of Disbursement	76155		1933.00
Airfare			
Candidate Name		Category/	
Office Sought: House Disburse	ment For:	Туре	[MEMO ITEM]
Senate	Primary General		Memo Entry
President State: District:	Other (specify)		
State: District:  Full Name (Last, First, Middle Initial)			T
Continental Airlines			Transaction ID: SB21B-3463-20000 Date of Disbursement
Mailing Address 1000 Craith Street			$\begin{bmatrix} M & M \\ 0 & 8 \end{bmatrix}$ $\begin{bmatrix} D & D \\ 1 & 7 \end{bmatrix}$ $\begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}$
Mailing Address 1600 Smith Street			
,	State Zip Code TX 77002		Amount of Each Disbursement this Period
Purpose of Disbursement	77002		857.00
Airfare			
Candidate Name		Category/ Type	
Office Sought: House Disburse	ment For:		[MEMO ITEM] Memo Entry
Senate President	Primary General Other (specify) ▼		Wemo Liftiy
State: District:	Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-3463-30000
Delta Air Lines, Inc.			Date of Disbursement
Mailing Address 1030 Delta Boulevard			$\begin{bmatrix} 0 & 8 & M & 1 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0$
	State Zip Code GA 30320		Amount of Each Disbursement this Period
Purpose of Disbursement	00020		3769.10
Airfare			
Candidate Name		Category/ Type	
Office Sought: House Disburse	ment For:	. ,,,,	[MEMO ITEM]
Senate	Primary General		Memo Entry
President State: District:	Other (specify)		
			0.00
SUBTOTAL of Disbursements This Page (optional).		<b>&gt;</b>	0.00

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**SCHEDULE B (FEC Form 3X)** FOR LINE NUMBER: PAGE 43 / 62 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b 22 23 25 26 Detailed Summary Page 27 28a 28b 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-3463-40000 Frontier Airlines Date of Disbursement 0 8 2011 Mailing Address Frontier Center One 7001 Tower Road City State Zip Code Amount of Each Disbursement this Period CO 80249 Denver 382.40 Purpose of Disbursement Airfare Candidate Name Category/ Type [MEMO ITEM] Office Sought: Disbursement For: House Memo Entry General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-3463-50000 SOUTHWEST AIRLINES Date of Disbursement 0 8 2011 Mailing Address 2702 LOVE FIELD DR City State Zip Code Amount of Each Disbursement this Period **DALLAS** 75235 TΧ 672.00 Purpose of Disbursement Airfare Candidate Name Category/ Type [MEMO ITEM] Office Sought: House Disbursement For: Memo Entry Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-3463-60000 **United Airlines** Date of Disbursement 2011 Mailing Address 77 W. Wacker Drive City State Zip Code Amount of Each Disbursement this Period Chicago IL 60601 7572.40 Purpose of Disbursement Airfare Candidate Name Category/ Type [MEMO ITEM] Office Sought: House Disbursement For: Memo Entry Senate Primary General President Other (specify) State: District: 0.00 SUBTOTAL of Disbursements This Page (optional) ....

SCHEDULE B (FEC Form 3X)	Use separ	rate schedule(s)	FOR LINE NUMBER:			PAGE 44 / 62								
ITEMIZED DISBURSEMENTS	for each c Detailed S	ategory of the cummary Page	×	2	ck only 21b 27	22 28a		23 28b		24	Вс		25 29	2 3
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name														;
NAME OF COMMITTEE (In Full)					e 10 30	iicit cont	iibut	10115	1101	II Suc	,11 ()	JIIII	iiiiee	
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL	DEFSET ACCC	JUNI	ı										
Full Name (Last, First, Middle Initial) US Airways Group Inc.						<b>Trans</b> Date				_	21B	-34	63-70	0000
Mailing Address 111 W. Rio Salado Pkwy						0 <sup>M</sup> 8	М	/ D	1	<sup>D</sup> /	Y	ž	0 1 1	Y
•	State AZ	Zip Code 85281				Amou	unt o	f Eac	h [	Disbu	rser	-		Period
Purpose of Disbursement Airfare												-1	19.20	
Candidate Name			Cate	egoi ype	ry/									
Office Sought: House Disburser Senate President	ment For: Primary Other (spec	General	.,	7,60		[MEN Mem			1]					
State: District:														
Full Name (Last, First, Middle Initial) AMERICAN EXPRESS						<b>Trans</b> Date	of D	isbur	ser	nent	21B	-34	64	
Mailing Address P O BOX 1270						8 <sup>M</sup> 0	М	/ D	1	<b>7</b>	Υ	ž	0 1 1	Y
•	State NJ	Zip Code 07101				Amou	ınt o	f Eac	:h [	Disbu	rser	nent	this F	Period
Purpose of Disbursement Train/Bus Travel				_		L.				-		13	35.30	
Candidate Name			Cate	egoi ype	ry/									
Senate President	ment For: Primary Other (spec	General €				See A	Atta	ched	M	lemo	Er	itry		
State: District:														
Full Name (Last, First, Middle Initial) Amtrak						Trans Date	of D	isbur	ser	nent	21B			
Mailing Address Union Station 50 Massachusetts Ave., N	ΝE					0 <sup>M</sup> 8	IVI	Ľ	1	7	Ľ	2	0 1 1	
	State DC	Zip Code 20002				Amol	unt o	f Eac	h [	Disbu	rser	nent	this F	Period
Purpose of Disbursement Train/Bus Travel					$\neg$							13	35.30	
Candidate Name			Cate	egoi ype										
Office Sought: House Disburser Senate President	ment For: Primary Other (spec	General				[MEN Mem			IJ					
State: District:														
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SUBTOTAL of Disbursements This Page (optional)					•							13	5.30	

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SCHEDULE B (FEC Form 3X)	11	FOR LINE	NUMBER: PAGE 45/62
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(Crieck only	
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	e and address of any political	committee to so	micit contributions from such committee
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-3465
AMERICAN EXPRESS			Date of Disbursement  O 8
Mailing Address P O BOX 1270			08 17 7 2011
,	State Zip Code NJ 07101		Amount of Each Disbursement this Period
Purpose of Disbursement		· · ·	53004.79
Lodging & Catering  Candidate Name		Category/	
		Туре	
Office Sought: House Disburse Senate	ement For:    Primary   General		See Attached Memo Entry
President	Other (specify)		
State: District:  Full Name (Last, First, Middle Initial)			
Embassy Suites Hotel			Transaction ID: SB21B-3465-10000 Date of Disbursement
Mailing Address 8000 Tartak Street Isle Verde			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}$
City	State Zip Code		Amount of Each Disbursement this Period
Carolina Purpose of Disbursement	PR 00979		1495.11
Lodging & Catering			
Candidate Name		Category/ Type	[MEMO ITEM]
Office Sought: House Disburse Senate	ement For:    Primary   General		Memo Entry
President	Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: CD01D 0405 00000
InterContinental Miami			Transaction ID: SB21B-3465-20000 Date of Disbursement
Mailing Address 100 Chopin Plaza			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}$
	State Zip Code FL 33131		Amount of Each Disbursement this Period
Purpose of Disbursement			17432.56
Lodging & Catering  Candidate Name		Category/	
Saladate Harro		Type	[MEMO ITEM]
Office Sought: House Disburse Senate	ement For:  Primary General		Memo Entry
President State: District:	Other (specify)		
			53004.79
SUBTOTAL of Disbursements This Page (optional).			0000 117 0

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age# 11932437003		
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)    X   21b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name		vany person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACCOL	JNT
Full Name (Last, First, Middle Initial) InterContinental New York Barclay  Mailing Address 111 East 48th Street		Transaction ID: SB21B-3465-30000 Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City New York  Purpose of Disbursement Lodging & Catering	State Zip Code NY 10017	Amount of Each Disbursement this Period
Candidate Name	ement For: Primary General Other (specify)	Category/ Type  [MEMO ITEM]  Memo Entry
Full Name (Last, First, Middle Initial) Radisson Nashua Hotel  Mailing Address 11 Tara Boulevard		Transaction ID: SB21B-3465-40000 Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Nashua	State Zip Code NH 03062	Amount of Each Disbursement this Period
Purpose of Disbursement Lodging & Catering Candidate Name  Office Sought: House Disburs	ement For:	Category/ Type  [MEMO ITEM]
Senate President State: District:	Primary General Other (specify) ▼	Memo Entry
Full Name (Last, First, Middle Initial) Renaissance Philadelphia Airport		Transaction ID: SB21B-3465-50000 Date of Disbursement
Mailing Address 500 Stevens Drive		088 / 017 / 2011
City Philadelphia Purpose of Disbursement	State Zip Code PA 19113	Amount of Each Disbursement this Period 9412.80
Candidate Name  Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)	Category/ Type  [MEMO ITEM]  Memo Entry
State: District:		
SUBTOTAL of Disbursements This Page (optional)		• 0.00

Detailed Summary Page    X   21b     22     23     24     25     27     28     28     29     29     29     20		B (FEC Form 3	·		arate schedule(s)			R LINE	NUMBE	R:		I	PAGE	47 /	62
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  Full Name (Last, First, Middle Initial) 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 President State: District:  Full Name (Last, First, Middle Initial) Sheraton Deriver Hotel  City State Zip Code Code One of Disbursement For: Senate President Senate President Coding & Catering  City State Zip Code One of Disbursement Initial Sheraton Deriver Hotel  City State Zip Code One of Disbursement Initial Sheraton Deriver Hotel  City State Zip Code One of Disbursement Initial Sheraton Deriver Hotel  City State Zip Code One of Disbursement Initial Sheraton Deriver Office Sought: House President Other (specify) ▼  Office Sought: House Senate Primary General Other (specify) ▼  Office Sought: House Senate President Other (specify) ▼  Office Sought: House Senate President Code One of Disbursement Initial Other (specify) ▼  Office Sought: House Senate President Code One of Disbursement Initial Other (specify) ▼  Office Sought: House Senate President Code One of Disbursement Initial Other (specify) ▼  Office Sought: House Senate President Code One of Disbursement Initial Other (specify) ▼  Office Sought: House Senate President Other (specify) ▼  Office Sought: House President	II EMIZED L	DISBURSEMEN	S				Ò	21b	22	П		$\square$	<sub>c</sub> F		$\frac{2}{3}$
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT  Full Name (Last, First, Middle Initial) Residence Inn Atlanta Downtown  Mailing Address 134 Peachtree Street NW  City Atlanta State Zip Code Atlanta Candidate Name  Office Sought: House Senate President Disbursement For: Senate President Mailing Address 1550 Court Place  City State Zip Code Co 80202  Purpose of Disbursement Lodging & Catering Candidate Name  Office Sought: House Disbursement For: Senate President Mailing Address 1550 Court Place  City State Zip Code Co 80202  Purpose of Disbursement Lodging & Catering Candidate Name  Office Sought: House Disbursement For: Senate President District:  Full Name (Last, First, Middle Initial) Sheraton Denver Hotel  Mailing Address 1550 Court Place  City State Zip Code Co 80202  Purpose of Disbursement Lodging & Catering Candidate Name  Office Sought: House Disbursement For: Senate President State: District:  Full Name (Last, First, Middle Initial) Transaction ID: SB21B-3465-70000 Date of Disbursement this Period  Memo Entry  IMEMO ITEM] Memo Entry  Memo Entry  IMEMO ITEM] Memo Entry  IMEMO ITEM] Memo Entry  Office Sought: House Primary Candidate Name  Office Sought: House Disbursement For: Senate President  Office Sought: House Disbursement For: Senate President  Office Sought: House Pres															s
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Category/ Type  Office Sought: House Senate Prisident State: District:  Full Name (Last, First, Middle Initial) Sheraton Denver House Coding & Catering Candidate Name  City Senate President Coding & Catering Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Transaction ID: SB21B-3465-70000 Date of Disbursement Initial Date of Disbursement Initial Date of Disbursement Initial Date of Disbursement Initial District:  Full Name (Last, First, Middle Initial) Sheraton Denver Code Code Code R0202  Category/ Type  Office Sought: House Senate Primary General Primary General Disbursement Initial Date of Disbursement Initial Da									Amou	nt o	f Each	Disbur	seme	nt this	Period
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Full Name (Last, First, Middle Initial) The Annabelle Inn  Mailing Address  232 West Main Street  City Aspen CO 81611  Purpose of Disbursement Lodging & Catering Candidate Name  Disbursement For: Senate Primary General Other (specify)  Transaction ID: SB21B-3465-80000 Date of Disbursement  Amount of Each Disbursement this Period  Category/ Type  [MEMO ITEM] Memo Entry		Senate President		Primary					-						
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page  (che	R LINE NUMBER: PAGE 48 / 62 cck only one) 21b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACCOUNT	
Full Name (Last, First, Middle Initial) AMERICAN EXPRESS		Transaction ID: SB21B-3466 Date of Disbursement
Mailing Address P O BOX 1270		088 / 017 / 2011
City NEWARK	State Zip Code NJ 07101	Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental		8718.31
Candidate Name	Categor Type	
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)	See Attached Memo Entry
Full Name (Last, First, Middle Initial)		Transaction ID: SB21B-3466-10000
Avis Rent-A-Car  Mailing Address 233 East Airport Rd., Su	ite G	Date of Disbursement  O 8
City	State Zip Code	Amount of Each Disbursement this Period
Aspen Purpose of Disbursement	CO 81611	1112.30
Car Rental Candidate Name	Catego	
Office Sought: House Senate President State: District:	Type ement For: Primary General Other (specify)	[MEMO ITEM] Memo Entry
Full Name (Last, First, Middle Initial)		Transaction ID: SB21B-3466-20000
Avis Rent-A-Car		Date of Disbursement
Mailing Address 10000 Bessie Coleman	Drive	08 17 2011
City Chicago	State Zip Code IL 60666	Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental		2654.77
Candidate Name	Categor Type	
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)	[MEMO ITEM] Memo Entry
State: District:		
SUBTOTAL of Disbursements This Page (optional)		8718.31

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# ITEMIZED DISBURSEMENTS

**SCHEDULE B (FEC Form 3X)** FOR LINE NUMBER: PAGE 49 / 62 Use separate schedule(s) (check only one) for each category of the 21b 22 23 25 26 Detailed Summary Page 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-3466-30000 Avis Rent-A-Car Date of Disbursement 0 8 2011 Mailing Address 510 La Guardia Airport Suite 25 City State Zip Code Amount of Each Disbursement this Period Flushing NY 11371 635.28 Purpose of Disbursement Car Rental Candidate Name Category/ Type [MEMO ITEM] Office Sought: Disbursement For: House Memo Entry General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-3466-40000 Avis Rent-A-Car Date of Disbursement 0 8 2011 Mailing Address 510 La Guardia Airport Suite 25 City State Zip Code Amount of Each Disbursement this Period Flushing NY 11371 75.00 Purpose of Disbursement Car Rental Candidate Name Category/ Туре [MEMO ITEM] Office Sought: House Disbursement For: Memo Entry Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-3466-50000 Avis Rent-A-Car Tolls Date of Disbursement 2011 Mailing Address P.O. Box 222209 City State Zip Code Amount of Each Disbursement this Period Great Neck NY 11022 29.55 Purpose of Disbursement Car Rental Candidate Name Category/ Type [MEMO ITEM] Office Sought: House Disbursement For: Memo Entry Senate Primary General President Other (specify) State: District: 0.00 SUBTOTAL of Disbursements This Page (optional) ....

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
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NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	DUNT	
Full Name (Last, First, Middle Initial) Budget Rent-A-Car			Transaction ID: SB21B-3466-60000 Date of Disbursement
Mailing Address Liberty Intl Airport 38 Carson Road			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 1 & D \\ 1 & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}$
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Purpose of Disbursement Car Rental			185.63
Candidate Name		Category/ Type	[MEMO ITEM]
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼		Memo Entry
State: District:  Full Name (Last, First, Middle Initial)			T ID ODDAD 0400 70000
Budget Rent-A-Car Tolls			Transaction ID: SB21B-3466-70000 Date of Disbursement
Mailing Address 11 Grace Avenue, Suite 1	08		088 / 017 / 2011
Great Neck	State Zip Code NY 11021		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental			13.65
Candidate Name		Category/ Type	[MEMO ITEM]
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼		Memo Entry
State: District: Full Name (Last, First, Middle Initial)			
Enterprise Rent-A-Car			Transaction ID: SB21B-3466-80000 Date of Disbursement
Mailing Address PO Box 795153			$\begin{bmatrix} \begin{smallmatrix} M & R & M \\ O & R & M \end{smallmatrix} & \begin{bmatrix} \begin{smallmatrix} D & D \\ D & T & T \end{smallmatrix} \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & T & T \end{bmatrix} & \begin{bmatrix} T & T & T & T \\ T & T & T & T & T \end{bmatrix}$
	State Zip Code MO 63179		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental			762.09
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Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		[MEMO ITEM] Memo Entry
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# **SCHEDULE B (FEC Form 3X)**

FOR LINE NUMBER: PAGE 52 / 62 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b 22 23 25 26 Detailed Summary Page 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-3466-120000 Hertz Corporation Date of Disbursement 0 8 2011 Mailing Address Commercial Billing Dept. PO Box 121124 Zip Code City State Amount of Each Disbursement this Period Dallas TX 75312 458.81 Purpose of Disbursement Car Rental Candidate Name Category/ Type [MEMO ITEM] Office Sought: Disbursement For: House Memo Entry General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-3430 Missouri Victory 2010 Date of Disbursement 2 3 0 8 2011 Mailing Address P.O. Box 719 City State Zip Code Amount of Each Disbursement this Period Jefferson City MO 65102 -10403.01 Purpose of Disbursement Refund of Offset Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-3431 Robin Carnahan for Senate Date of Disbursement 2 9 2011 Mailing Address PO Box 50378 City State Zip Code Amount of Each Disbursement this Period St. Louis MO 63105 2468.64 Purpose of Disbursement Refund of Offset Candidate Name Category/ Robin Carnahan for Senate Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District:

SUBTOTAL of Disbursements This Page (optional) ...

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EMIZED DISBURSEMENTS for each	arate schedule(s)		OR LIN	JE NI	INADE	· ·							
EMIZED DISBURSEMENTS for each					_	ι.			PA	AGE	53 /	62	
Detailed	category of the	IX	heck o ] 21b	nly or	ne) 22 <b>[</b>	7 23	,	$\Box$	24		25		26
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NAME OF COMMITTEE (In Full)	ss of any political	COMMIN	ilee io	SUIICII	CONTIN	Julion	3 110	JIII 3	Sucii	5011111	iiiiee		
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL	OFFSET ACC	OUNT											
Full Name (Last, First, Middle Initial)					Transa					B-34	32		
Hodes for Senate					Date o	f Disb			nt	/ Y	Y	Υ	
Mailing Address 75 S Main Street, #253					0 8		2	9	Ĺ	2	0 Ť	1	
City State Concord NH	Zip Code 03301				Amour	t of E	ach	Dis	burse	men	t this	Perio	d
Purpose of Disbursement Refund of Offset										12	59.94	1	
Candidate Name Hodes for Senate		Cate											
Office Sought: House Disbursement For:		- 71											
Senate Primary President Other (spe	General												
State: District:	ecily) 🔻												
Full Name (Last, First, Middle Initial)					Transa	ection	ID:	S	B21	B-34	33		
MISSOURI DEMOCRATIC PARTY					Date o				nt	,	· V	V	
Mailing Address P.O. BOX 719					0 <sup>M</sup> 8	<u>'</u>	□2	9		ž	0 Ť	1 1	
City State JEFFERSON CITY MO	Zip Code 65102				Amour	nt of E	ach	Dis	burse	men	t this	Perio	d
Purpose of Disbursement	65102									79	34.3	7	$\neg$
Refund of Offset													
Candidate Name MISSOURI DEMOCRATIC PARTY		Cate Ty											
Office Sought: House Disbursement For: Senate Primary	General												
President Other (spe													
State: District:													
Full Name (Last, First, Middle Initial) New Hampshire Democratic Party					<b>Transa</b> Date o			_		B-34	34		
<u> </u>					M			9	/ [`	Ý	0 Ť	4 Y	
Mailing Address 105 North State Street					0 8								
City State Concord NH	Zip Code 03301				Amour	t of E	ach	Dis	burse	emen	t this	Perio	d
Purpose of Disbursement			-							16	81.90	)	$\Box$
Refund of Offset  Candidate Name		Cate	nory/										
New Hampshire Democratic Party		Ту											
Office Sought: House Disbursement For: Senate Primary	General												
President Other (spe													
State: District:													

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

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

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only		PAGE 54 / 62
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b	22 23	24 25 26
	, ,	27	28a 28b	28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT		
Full Name (Last, First, Middle Initial) Committee to Re-Elect Loretta Sanchez			Transaction ID: S Date of Disbursemen	
Mailing Address 1212 S Victory			08 / 29	2011
•	State Zip Code CA 91502		Amount of Each Disl	oursement this Period
Purpose of Disbursement Refund of Offset				1600.00
Candidate Name Committee to Re-Elect Loretta Sanchez		Category/ Type		
Senate President	ment For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) Carol Shea-Porter for Congress			Transaction ID: S Date of Disbursemen	nt
Mailing Address PO Box 453			08 / 29	Y ŽOŽI
•	State Zip Code NH 03866		Amount of Each Disl	oursement this Period
Purpose of Disbursement Refund of Offset				1282.34
Candidate Name Carol Shea-Porter for Congress		Category/ Type		
Senate President	ment For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) DEPARTMENT OF TREASURY			Transaction ID: S Date of Disbursemen	nt
Mailing Address P.O. BOX 27800			088 / 030	2011
	State Zip Code DC 20038-7800		Amount of Each Disl	oursement this Period
Purpose of Disbursement Lodging & Catering				2507.67
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	туре		
State: District:	Salor (opoony) 🔻			
SUBTOTAL of Disbursements This Page (optional)				5390.01

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SCHEDULE B (FEC Form 3X)		
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page  FOR LIN (check or 21b 27)	PAGE 55 / 62    PAGE 55 / 62
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name		
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACCOUNT	
Full Name (Last, First, Middle Initial) DEPARTMENT OF TREASURY		Transaction ID: SB21B-3438 Date of Disbursement
Mailing Address P.O. BOX 27800		088 / D30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City WASHINGTON	State         Zip Code           DC         20038-7800	Amount of Each Disbursement this Period
Purpose of Disbursement Lodging & Catering Candidate Name		-939.60
	Category/ Type	
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial)		Transaction ID: SB21B-3439
Kristina Broadie		Date of Disbursement
Mailing Address 10606 Pinedale Drive		08 M / D 3 D / Y Y Y Y Y Y
City Silver Spring	State Zip Code MD 20901	Amount of Each Disbursement this Period
Purpose of Disbursement		22.36
Travel Expense Candidate Name	Category/ Type	
Senate President	ement For: Primary General Other (specify)	
State: District: Full Name (Last, First, Middle Initial)		Transaction ID: SB21B-3440
Kristina Broadie		Date of Disbursement
Mailing Address 10606 Pinedale Drive		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Silver Spring	State Zip Code MD 20901	Amount of Each Disbursement this Period
Purpose of Disbursement Advance Team Stipend		100.00
Candidate Name	Category/ Type	
	, , , , , , , , , , , , , , , , , , ,	-
Office Sought: House Disburs Senate President	ement For:    Primary   General     Other (specify)   \	

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

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s	) FOR LINE (check only		PAGE 56 / 62
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b		24
	Detailed Outlittary Fage	27		28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	COUNT		
Full Name (Last, First, Middle Initial)			Transaction ID: SE	B21B-3441
Jeff Goldstein			Date of Disbursemen	t
Mailing Address 30 Mill Street			08 / 30	2011
City Newton	State Zip Code MA 02459		Amount of Each Disb	oursement this Period
Purpose of Disbursement	0E 100			100.00
Travel Expense				
Candidate Name		Category/ Type		
Office Sought: House Disburse	ement For:			
Senate   President	Primary General Other (specify) ▼			
State: District:	Other (specify)			
Full Name (Last, First, Middle Initial)			Transaction ID: SE	B21B-3442
DAVID GREELISH			Date of Disbursemen	
Mailing Address 306 Dartmouth St. Suite 200			08	2011
City	State Zip Code MA 02116		Amount of Each Disb	oursement this Period
Boston Purpose of Disbursement	IVIA UZ116			115.00
Travel Expense				
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate	ement For: Primary General			
President	Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) DAVID GREELISH			Transaction ID: SE Date of Disbursemen	
Mailing Address 306 Dartmouth St. Suite 200			$\begin{bmatrix} 0 & 8 & M \end{bmatrix}$	2011
City Boston	State Zip Code MA 02116		Amount of Each Disb	oursement this Period
Purpose of Disbursement	1VIA 02110			600.00
Advance Team Stipend				
Candidate Name		Category/ Type		
Office Sought: House Disburse	ement For:	No. o		
Senate	Primary General			
President State: District:	Other (specify)			
SUBTOTAL of Disbursements This Page (optional)				815.00
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)			Ė NUMBE	R:	PA	GE 5	57 / 62	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	1 –	check or 21b 27	22 28a	23 28b	24 28c		25	26 30b
Any Information copied from such Reports and Statemer or for commercial purposes, other than using the name			y persor	for the pu	rpose of s	oliciting co	ontribu	tions	1 300
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	OUN <sup>-</sup>	Т						
Full Name (Last, First, Middle Initial) Helen Langan Mailing Address 834 East Bryan Avenue				Date	saction IDs of Disburs			4	
City Salt Lake City	State Zip Code UT 84105			Amou	ınt of Each	Disburse		his Peri	iod
Purpose of Disbursement Advance Team Stipend Candidate Name			egory/		а а		000	5.00	
Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify)		<u> </u>						
Full Name (Last, First, Middle Initial) Jeani Murray  Mailing Address 1417 Chapin Street, NW,	#302			Date	saction ID of Disburs	_		7	
,	State Zip Code DC 20009			Amou	ınt of Each	Disburse	ment t	his Peri	iod
Purpose of Disbursement Advance Team Stipend Candidate Name  Office Sought: House Disburser			egory/ ype				600	0.00	
Senate President State: District:	Primary General Other (specify)								
Full Name (Last, First, Middle Initial) Murray Victory 2010				Date	saction ID: of Disburs	ement			
Mailing Address 1050 17th Street, NW Suite 590				0 <sup>M</sup> 8	M / D 3	3 0 / Y	ž 0	11	
	State Zip Code DC 20036			Amou	int of Each				od
Purpose of Disbursement Other							-781	1.09	
Candidate Name Murray Victory 2010			egory/ ype						
Office Sought: House Disburser Senate President	ment For: Primary General Other (specify) ▼								
State: District:							•		_
SUBTOTAL of Disbursements This Page (optional)			. •	<u></u>			-6611	.09	

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SCHEDULE B (FEC Form 3X)		arate schedule(s)			OR LIN			R:		P	AGE	58 /	62
ITEMIZED DISBURSEMENTS		category of the Summary Page		Ė	21b 27	Ä	22 28a		23 28b	24 28c	F	25 29	$\prod_{3}^{2}$
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name							the pu			oliciting c			5
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL	OFFSET ACC	OUN	N_	Γ								
Full Name (Last, First, Middle Initial) Murray Victory 2010							Date o		sburse				Y
Mailing Address 1050 17th Street, NW Suite 590							0 <sup>M</sup> 8		<sup>D</sup> 3	Ŏ Ĺ	2	2 0 1 1	
•	State DC	Zip Code 20036					Amoui	nt o	f Each	Disburse	-		-
Purpose of Disbursement Refund of Offset								0			363	861.07	
Candidate Name Murray Victory 2010					egory/ /pe								
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General ecify) ▼											
Full Name (Last, First, Middle Initial) TYLER NORMAN									on ID:	SB21	B-34	450	
Mailing Address 128 W. 13th Street, #26							8 <sup>M</sup> 0	М	<sup>D</sup> 3	0 /	Ý	2 0 1 1	l Y
,	State NY	Zip Code 10011					Amoui	nt o	f Each	Disburse	emer	nt this f	Period
Purpose of Disbursement Travel Expense				0			L.					76.25	5
Candidate Name					egory/ /pe								
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General <b>▼</b>											
Full Name (Last, First, Middle Initial) TYLER NORMAN							Transa Date o			SB21	B-34	451	
Mailing Address 128 W. 13th Street, #26							8 <sup>M</sup> 0	М	<sup>D</sup> 3	0 /	Ž	2 0 1 1	l Y
	State NY	Zip Code 10011					Amoui	nt o	f Each	Disburse	emer	nt this f	Period
Purpose of Disbursement Advance Team Stipend	•••				•						6	00.00	)
Candidate Name					egory/ /pe								
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General ecify) ▼			-								
State: District:		•						_			_		
SUBTOTAL of Disbursements This Page (optional) .					. •						370	37.32	2

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

FOR LINE NUMBER: PAGE 59 / 62 Use separate schedule(s) (check only one) for each category of the 21b 22 23 24 25 26 Detailed Summary Page 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-3452 Benjamin Solomon Date of Disbursement 3 Ŏ 0 8 2011 Mailing Address 14 Black Birch Road City State Zip Code Amount of Each Disbursement this Period Scotch Plains NJ 07076 100.00 Purpose of Disbursement Advance Team Stipend Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-3453 Benjamin Solomon Date of Disbursement 0 8 ЗŎ 2011 Mailing Address 14 Black Birch Road City State Zip Code Amount of Each Disbursement this Period Scotch Plains 07076 NJ 7.29 Purpose of Disbursement **Events-Site Supplies** Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-3454 Benjamin Solomon Date of Disbursement 30 2011 Mailing Address 14 Black Birch Road City State Zip Code Amount of Each Disbursement this Period Scotch Plains NJ 07076 163.70 Purpose of Disbursement Travel Expense Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: 270.99

SUBTOTAL of Disbursements This Page (optional) ...

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SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE I (check only	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		by any person fo	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCC	UNT	
Full Name (Last, First, Middle Initial) Benjamin Solomon			Transaction ID: SB21B-3455 Date of Disbursement
Mailing Address 14 Black Birch Road			$\begin{bmatrix} 0 & 8 & M & M & M & M & M & M & M & M & M$
•	State Zip Code NJ 07076		Amount of Each Disbursement this Period
Purpose of Disbursement Advance Team Stipend			600.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)	.,,,,,	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-3456
Marik von Rennenkampff			Date of Disbursement
Mailing Address 1755 T Street, NW			$\begin{bmatrix} 0 & 8 & M & M & M & M & M & M & M & M & M$
	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			95.10
Candidate Name		Category/ Type	
Office Sought:  Senate  President  State:  Disburse	ment For: Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-3457
Marik von Rennenkampff			Date of Disbursement
Mailing Address 1755 T Street, NW			$\begin{bmatrix} 0.8 & M & 7 & M & M & M & M & M & M & M & M$
	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement			600.00
Advance Team Stipend Candidate Name		Category/	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼	Туре	
State: District:	Other (specify)		
SUBTOTAL of Disbursements This Page (optional) .			1295.10

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 N (check only	
		27	28a 28b 28c 29 30b
Any Information copied from such Reports and State or for commercial purposes, other than using the nan			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACCO	UNT	
Full Name (Last, First, Middle Initial) DEPARTMENT OF TREASURY			Transaction ID: SB21B-3458 Date of Disbursement
Mailing Address P.O. BOX 27800			08 / 30 / 2011
City WASHINGTON	State         Zip Code           DC         20038-7800		Amount of Each Disbursement this Period
Purpose of Disbursement Lodging & Catering Candidate Name		Category/	17.90
Office Sought:    House   Disburs	ement For:  Primary General  Other (specify)	Туре	
Full Name (Last, First, Middle Initial) DEPARTMENT OF TREASURY			Transaction ID: SB21B-3459 Date of Disbursement
Mailing Address P.O. BOX 27800			
City WASHINGTON	State         Zip Code           DC         20038-7800		Amount of Each Disbursement this Period
Purpose of Disbursement Lodging & Catering			279.30
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial) Kathryn Minor			Transaction ID: SB21B-3460 Date of Disbursement
Mailing Address 1323 28th Street, NW			08 / 30 / 2011
City Washington	State Zip Code DC 20007		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			124.89
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District:			
SUBTOTAL of Disbursements This Page (optional)		<u></u>	422.09

State:

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## **SCHEDULE B (FEC Form 3X)**

District:

FOR LINE NUMBER: PAGE 62 / 62 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the Detailed Summary Page 21b 22 23 26 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-3461 Kathryn Minor Date of Disbursement 0 8 3 0 2011 Mailing Address 1323 28th Street, NW City State Zip Code Amount of Each Disbursement this Period Washington DC 20007 600.00 Purpose of Disbursement Advance Team Stipend Candidate Name Category/ Type Office Sought: Disbursement For: House Senate Primary General President Other (specify)

SUBTOTAL of Disbursements This Page (optional)	<b>&gt;</b>	600.00
TOTAL This Period (last page this line number only)		224898.74