

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

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

Hopefund, Inc.

ADDRESS (number and street)

607 14th Street, NW, Suite 800

☐Check if different
than previously
reported. (ACC)

Washington

DC

20005

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00409052

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

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

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

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

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

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

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☒

Special (30S)

Election on

10

16

2007

in the
State of

MA

5. Covering Period

07

01

2007

through

11

05

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Harvey Wineberg

Signature of Treasurer

Electronically Filed by Harvey Wineberg

Date

11

15

2007

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

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
 Hopefund, Inc.

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	1	0	5	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1		676728.26
(b) Cash on Hand at Beginning of Reporting Period	513012.26	
(c) Total Receipts (from Line 19)	850.78	44178.68
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	513863.04	720906.94
7. Total Disbursements (from Line 31)	414551.74	621595.64
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	99311.30	99311.30
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	5147.76	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Hopefund, Inc.

Report Covering the Period:

From:

M M
0 7D D
0 1Y Y Y Y
2 0 0 7

To:

M M
1 1D D
0 5Y Y Y Y
2 0 0 7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	22150.00
(i) Itemized (use Schedule A)	0.00	12111.76
(ii) Unitemized	0.00	34261.76
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	0.00	0.00
(b) Political Party Committees	0.00	2000.00
(c) Other Political Committees (such as PACs)	0.00	36261.76
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡	0.00	0.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	443.98	6728.98
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	406.80	1187.94
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	850.78	44178.68
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	850.78	44178.68

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	46351.74	164695.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	46351.74	164695.64
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	245000.00	329000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	4700.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	4700.00
29. Other Disbursements.....	123200.00	123200.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	414551.74	621595.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	414551.74	621595.64

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	36261.76
34. Total Contribution Refunds (from Line 28(d))	0.00	4700.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	31561.76
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	46351.74	164695.64
37. Offsets to Operating Expenditures (from Line 15, page 3)	443.98	6728.98
38. Net Operating Expenditures (subtract Line 37 from Line 36)	45907.76	157966.66

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

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

FOR LINE NUMBER: PAGE 6 / 61

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

Hopefund, Inc.

A.

Full Name (Last, First, Middle Initial)

Paychex, Inc.

Mailing Address 3060 Williams Drive
Suite 200

City State Zip Code
Fairfax VA 22031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

632.11

Date of Receipt

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

Transaction ID: C604306

Amount of Each Receipt this Period

443.98

Refund

SUBTOTAL of Receipts This Page (optional)

443.98

TOTAL This Period (last page this line number only)

443.98

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

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

FOR LINE NUMBER: PAGE 7 / 61

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

A. Full Name (Last, First, Middle Initial) Citibank FSB Mailing Address P.O. Box 18967 City State Zip Code Washington DC 20036-0967 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1187.94		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 3 1 / 2 0 0 7 Transaction ID: C604303 Amount of Each Receipt this Period 134.75 * Interest
B. Full Name (Last, First, Middle Initial) Citibank FSB Mailing Address P.O. Box 18967 City State Zip Code Washington DC 20036-0967 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1187.94		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 3 1 / 2 0 0 7 Transaction ID: C604304 Amount of Each Receipt this Period 135.03 * Interest
C. Full Name (Last, First, Middle Initial) Citibank FSB Mailing Address P.O. Box 18967 City State Zip Code Washington DC 20036-0967 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1187.94		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 8 / 2 0 0 7 Transaction ID: C604305 Amount of Each Receipt this Period 116.16 * Interest

SUBTOTAL of Receipts This Page (optional)

385.94

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 8 / 61

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

A.

Full Name (Last, First, Middle Initial)

Citibank FSB

Mailing Address P.O. Box 18967

City

Washington

State

DC

Zip Code

20036-0967

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1187.94

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 7

Transaction ID: C604307

Amount of Each Receipt this Period

20.86

* Interest

SUBTOTAL of Receipts This Page (optional)

20.86

TOTAL This Period (last page this line number only)

406.80

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Perkins Coie, LLP

Mailing Address 1201 3rd Avenue, 40th Floor

City State Zip Code
Seattle WA 98101

Purpose of Disbursement
Legal & Accounting Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11894

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2002.09

Full Name (Last, First, Middle Initial)

B. Perkins Coie, LLP

Mailing Address 1201 3rd Avenue, 40th Floor

City State Zip Code
Seattle WA 98101

Purpose of Disbursement
Legal & Accounting Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11889

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2133.23

Full Name (Last, First, Middle Initial)

C. Perkins Coie, LLP

Mailing Address 1201 3rd Avenue, 40th Floor

City State Zip Code
Seattle WA 98101

Purpose of Disbursement
Legal & Accounting Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D12047

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2333.15

SUBTOTAL of Disbursements This Page (optional)

6468.47

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Consolidated Printing Company, Inc.

Mailing Address 4042 N Nashville Ave

City
Chicago

State
IL

Zip Code
60634-1427

Purpose of Disbursement
Printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11878

Date of Disbursement

/ /

Amount of Each Disbursement this Period

15435.14

Full Name (Last, First, Middle Initial)

B. Consolidated Printing Company, Inc.

Mailing Address 4042 N Nashville Ave

City
Chicago

State
IL

Zip Code
60634-1427

Purpose of Disbursement
Printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11965

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3007.67

Full Name (Last, First, Middle Initial)

C. Merry Maids

Mailing Address 4900 Leesburg Pike
Suite 409

City
Alexandria

State
VA

Zip Code
22302

Purpose of Disbursement
Cleaning Service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11969

Date of Disbursement

/ /

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional)

18742.81

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Lexis Nexis

Mailing Address P.O. Box 7247-7090

City Philadelphia State PA Zip Code 19170-7090

Purpose of Disbursement
Research

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11879

Date of Disbursement

07 / 24 / 2007

Amount of Each Disbursement this Period

341.57

Full Name (Last, First, Middle Initial)

B. Citibank FSB

Mailing Address P.O. Box 18967

City Washington State DC Zip Code 20036-0967

Purpose of Disbursement
Bank Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11972

Date of Disbursement

07 / 10 / 2007

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. Citibank FSB

Mailing Address P.O. Box 18967

City Washington State DC Zip Code 20036-0967

Purpose of Disbursement
Bank Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11973

Date of Disbursement

08 / 06 / 2007

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional) ►

361.57

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Citibank FSB

Mailing Address P.O. Box 18967

City
Washington

State
DC

Zip Code
20036-0967

Purpose of Disbursement

Bank Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11974

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. Citibank FSB

Mailing Address P.O. Box 18967

City
Washington

State
DC

Zip Code
20036-0967

Purpose of Disbursement

Bank Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D12032

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. Citibank FSB

Mailing Address P.O. Box 18967

City
Washington

State
DC

Zip Code
20036-0967

Purpose of Disbursement

Bank Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D12046

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)

30.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. NGP Software, Inc.

Mailing Address 1101 Vermont Avenue NW
Suite 710

City Washington State DC Zip Code 20005

Purpose of Disbursement
Software

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D11952

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1350.00

Full Name (Last, First, Middle Initial)

B. Paychex, Inc.

Mailing Address 3060 Williams Drive
Suite 200

City Fairfax State VA Zip Code 22031

Purpose of Disbursement
Payroll Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D11970

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1.00

Full Name (Last, First, Middle Initial)

C. Paychex, Inc.

Mailing Address 3060 Williams Drive
Suite 200

City Fairfax State VA Zip Code 22031

Purpose of Disbursement
Payroll Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D11892

Date of Disbursement

/ /

Amount of Each Disbursement this Period

203.75

SUBTOTAL of Disbursements This Page (optional)

1554.75

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Paychex, Inc.

Mailing Address 3060 Williams Drive
Suite 200

City State Zip Code
Fairfax VA 22031

Purpose of Disbursement

Payroll Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D11891

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10.58

Full Name (Last, First, Middle Initial)

B. SunTrust

Mailing Address P.O. Box 6600

City State Zip Code
Hagerstown MD 21741

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D11967

Date of Disbursement

/ /

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. SunTrust

Mailing Address P.O. Box 6600

City State Zip Code
Hagerstown MD 21741

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D11968

Date of Disbursement

/ /

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional)

60.58

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. SunTrust

Mailing Address P.O. Box 6600

City
Hagerstown

State
MD

Zip Code
21741

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D12033

Date of Disbursement

/ /

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. SunTrust

Mailing Address P.O. Box 6600

City
Hagerstown

State
MD

Zip Code
21741

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D12036

Date of Disbursement

/ /

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. SunTrust

Mailing Address P.O. Box 6600

City
Hagerstown

State
MD

Zip Code
21741

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D12037

Date of Disbursement

/ /

Amount of Each Disbursement this Period

119.75

SUBTOTAL of Disbursements This Page (optional)

169.75

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 260002

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Credit Card Payment, See Below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D11885

Date of Disbursement

08 / 08 / 2007

Amount of Each Disbursement this Period

591.19

B. American Express

Mailing Address PO Box 260002

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Bank Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D11886

Date of Disbursement

08 / 08 / 2007

Amount of Each Disbursement this Period

475.99

[MEMO ITEM]

C. Pair Networks, Inc.

Mailing Address 2403 Sidney Street
Suite 510

City Pittsburgh State PA Zip Code 15203

Purpose of Disbursement
Web Hosting

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D11888

Date of Disbursement

08 / 08 / 2007

Amount of Each Disbursement this Period

65.25

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

591.19

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Topica, Inc.

Mailing Address 685 Market Street
Suite 300

City San Francisco State CA Zip Code 94105

Purpose of Disbursement

E-mail Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D11887

Date of Disbursement

08 / 08 / 2007

Amount of Each Disbursement this Period

49.95

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 260002

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Credit Card Payment, See Below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D11961

Date of Disbursement

08 / 28 / 2007

Amount of Each Disbursement this Period

424.33

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 260002

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Bank Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D11962

Date of Disbursement

08 / 28 / 2007

Amount of Each Disbursement this Period

303.73

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

424.33

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Pair Networks, Inc.

Mailing Address 2403 Sidney Street
Suite 510

City Pittsburgh State PA Zip Code 15203

Purpose of Disbursement
Web Hosting

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11964

Date of Disbursement

08 / 28 / 2007

Amount of Each Disbursement this Period

70.65

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Topica, Inc.

Mailing Address 685 Market Street
Suite 300

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
E-mail Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11963

Date of Disbursement

08 / 28 / 2007

Amount of Each Disbursement this Period

49.95

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 260002

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Credit Card Payment, See Below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11976

Date of Disbursement

08 / 06 / 2007

Amount of Each Disbursement this Period

17384.98

SUBTOTAL of Disbursements This Page (optional)

17384.98

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. American Trans Air

Mailing Address 7337 West Washington Street

City Indianapolis State IN Zip Code 46231-1328

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11990

Date of Disbursement

08 / 06 / 2007

Amount of Each Disbursement this Period

261.23

[MEMO ITEM]

B. Alaska Airlines

Mailing Address P.O. Box 68900

City Seattle State WA Zip Code 98168

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11995

Date of Disbursement

08 / 06 / 2007

Amount of Each Disbursement this Period

464.30

[MEMO ITEM]

C. United Airlines

Mailing Address 8550 W Bryn Mawr Ave

City Chicago State IL Zip Code 60631-3200

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11996

Date of Disbursement

08 / 06 / 2007

Amount of Each Disbursement this Period

1499.51

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 20 / 61

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address 8550 W Bryn Mawr Ave

City Chicago State IL Zip Code 60631-3200

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D12029

Date of Disbursement

08 / 06 / 2007

Amount of Each Disbursement this Period

380.60

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US Postmaster

Mailing Address National Capitol Station
2 Massachusetts Avenue NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D12017

Date of Disbursement

08 / 06 / 2007

Amount of Each Disbursement this Period

1043.30

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Circuit City

Mailing Address 1030 W North Ave

City Chicago State IL Zip Code 60622-2545

Purpose of Disbursement

Office Equipment

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11987

Date of Disbursement

08 / 06 / 2007

Amount of Each Disbursement this Period

1379.66

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 21 / 61

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Budget Rent-a-Car

Mailing Address 300 Centre Pointe Drive

City
Virginia Beach

State
VA

Zip Code
23462

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D12001

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1269.32

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Creative Travel, Inc.

Mailing Address 530 Duane Street

City
Glen Ellyn

State
IL

Zip Code
60137

Purpose of Disbursement
Travel Agent Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11994

Date of Disbursement

/ /

Amount of Each Disbursement this Period

270.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Damilic Corporation

Mailing Address 14670 Southtown Lane

City
Rockville

State
MD

Zip Code
20850

Purpose of Disbursement
Office Supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11986

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.48

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 22 / 61

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Hewlett-Packard

Mailing Address 3000 Hanover St

City Palo Alto State CA Zip Code 94304-1112

Purpose of Disbursement
Office Equipment

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11985

Date of Disbursement

08 / 06 / 2007

Amount of Each Disbursement this Period

2509.41

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Staples

Mailing Address 500 Staples Drive

City Framingham State MA Zip Code 01702

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D12012

Date of Disbursement

08 / 06 / 2007

Amount of Each Disbursement this Period

225.25

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 260002

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Bank Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11988

Date of Disbursement

08 / 06 / 2007

Amount of Each Disbursement this Period

173.38

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 23 / 61

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Cingular Wireless

Mailing Address PO Box 8229

City
Aurora

State
IL

Zip Code
60572

Purpose of Disbursement
Telephone Service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D12004

Date of Disbursement

08 / 06 / 2007

Amount of Each Disbursement this Period

715.98

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Pair Networks, Inc.

Mailing Address 2403 Sidney Street
Suite 510

City
Pittsburgh

State
PA

Zip Code
15203

Purpose of Disbursement
Web Hosting

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11983

Date of Disbursement

08 / 06 / 2007

Amount of Each Disbursement this Period

29.95

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address PO Box 619612

City
Dallas

State
TX

Zip Code
75261-9612

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11998

Date of Disbursement

08 / 06 / 2007

Amount of Each Disbursement this Period

1489.98

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 24 / 61

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Topica, Inc.

Mailing Address 685 Market Street
Suite 300

City San Francisco State CA Zip Code 94105

Purpose of Disbursement

E-mail Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11980

Date of Disbursement

08 / 06 / 2007

Amount of Each Disbursement this Period

49.95

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Carey International Limousine

Mailing Address 4530 Wisconsin Ave NW

City Washington State DC Zip Code 20016

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D12006

Date of Disbursement

08 / 06 / 2007

Amount of Each Disbursement this Period

466.10

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Hotels.com

Mailing Address 8140 Walnut Hill Ln

City Dallas State TX Zip Code 75231-4350

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D12030

Date of Disbursement

08 / 06 / 2007

Amount of Each Disbursement this Period

421.20

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Penn Camera

Mailing Address 840 E Street, NW

City
Washington

State
DC

Zip Code
20004

Purpose of Disbursement
Office Equipment

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11981

Date of Disbursement

08 / 06 / 2007

Amount of Each Disbursement this Period

476.90

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US Airways

Mailing Address 2345 Crystal Drive

City
Arlington

State
VA

Zip Code
22227

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11989

Date of Disbursement

08 / 06 / 2007

Amount of Each Disbursement this Period

2025.51

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Giddy Giftbox

Mailing Address 855 Trosper Road
Suite 108-337

City
Tumwater

State
WA

Zip Code
98512

Purpose of Disbursement
Gifts for Seminar Trainers

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11982

Date of Disbursement

08 / 06 / 2007

Amount of Each Disbursement this Period

303.04

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Radison Hotel Providence Harbor

Mailing Address 220 India Street

City
Providence

State
RI

Zip Code
02906

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11997

Date of Disbursement

/ /

Amount of Each Disbursement this Period

310.39

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 260002

City
Fort Lauderdale

State
FL

Zip Code
33336-0001

Purpose of Disbursement
Credit Card Payment, See Below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D12038

Date of Disbursement

/ /

Amount of Each Disbursement this Period

173.23

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 260002

City
Fort Lauderdale

State
FL

Zip Code
33336-0001

Purpose of Disbursement
Bank Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D12039

Date of Disbursement

/ /

Amount of Each Disbursement this Period

40.23

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

173.23

TOTAL This Period (last page this line number only)

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

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

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Pair Networks, Inc.

Mailing Address 2403 Sidney Street
Suite 510

City Pittsburgh State PA Zip Code 15203

Purpose of Disbursement
Web Hosting

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D12044

Date of Disbursement

10 / 30 / 2007

Amount of Each Disbursement this Period

83.05

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Topica, Inc.

Mailing Address 685 Market Street
Suite 300

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
E-mail Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D12043

Date of Disbursement

10 / 30 / 2007

Amount of Each Disbursement this Period

49.95

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 260002

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Credit Card Payment, See Below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D12040

Date of Disbursement

10 / 05 / 2007

Amount of Each Disbursement this Period

171.19

SUBTOTAL of Disbursements This Page (optional)

171.19

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 260002

City
Fort Lauderdale

State
FL

Zip Code
33336-0001

Purpose of Disbursement

Bank Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D12041

Date of Disbursement

10 / 05 / 2007

Amount of Each Disbursement this Period

43.79

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Pair Networks, Inc.

Mailing Address 2403 Sidney Street
Suite 510

City
Pittsburgh

State
PA

Zip Code
15203

Purpose of Disbursement

Web Hosting

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D12045

Date of Disbursement

10 / 05 / 2007

Amount of Each Disbursement this Period

77.45

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Topica, Inc.

Mailing Address 685 Market Street
Suite 300

City
San Francisco

State
CA

Zip Code
94105

Purpose of Disbursement

E-mail Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D12042

Date of Disbursement

10 / 05 / 2007

Amount of Each Disbursement this Period

49.95

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

46132.85

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

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

FOR LINE NUMBER:
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Friends of Mary Landrieu

Mailing Address 607 14th Street, N.W.
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement
Contribution

Candidate Name
Mary Landrieu

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: LA District:

Transaction ID: D11893

Date of Disbursement

M M / D D / Y Y Y Y
09 / 12 / 2007

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. The Niki Tsongas Committee

Mailing Address P.O. Box 1454

City Lowell State MA Zip Code 01853

Purpose of Disbursement
Contribution

Candidate Name
Nicola S. Tsongas

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☐ General
☒ Other (specify) ▼

State: MA District: 05

O2007 Special Genera

Transaction ID: D11911

Date of Disbursement

M M / D D / Y Y Y Y
09 / 27 / 2007

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Andrew Rice for US Senate

Mailing Address P.O. Box 1027

City Oklahoma City State OK Zip Code 73102

Purpose of Disbursement
Contribution

Candidate Name
Andrew Monroe Rice

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: OK District:

Transaction ID: D11949

Date of Disbursement

M M / D D / Y Y Y Y
09 / 28 / 2007

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

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

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

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Jim Costa For Congress

Mailing Address 2037 West Bullard Avenue
Suite 355

City Fresno State CA Zip Code 93711

Purpose of Disbursement
Contribution

Candidate Name
Jim Costa

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 20

Transaction ID: D11900

Date of Disbursement

09 / 27 / 2007

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. Kagen 4 Congress

Mailing Address 100 West Lawrence Street

City Appleton State WI Zip Code 54911

Purpose of Disbursement
Contribution

Candidate Name
Steven Kagen

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: WI District: 08

Transaction ID: D11921

Date of Disbursement

09 / 27 / 2007

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Barbara Lee For Congress

Mailing Address 1736 Franklin Street
Suite 400

City Oakland State CA Zip Code 94612

Purpose of Disbursement
Contribution

Candidate Name
Barbara Lee

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 09

Transaction ID: D11928

Date of Disbursement

09 / 27 / 2007

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Nancy Boyda For Congress

Mailing Address 510 SW 10th Street

City Topeka State KS Zip Code 66612

Purpose of Disbursement
Contribution

Candidate Name
Nancy Boyda

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: KS District: 02

Transaction ID: D11922

Date of Disbursement

09 / 27 / 2007

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Patrick Murphy for Congress

Mailing Address P.O. Box 868

City Levittown State PA Zip Code 19058

Purpose of Disbursement
Contribution

Candidate Name
Patrick Murphy

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 08

Transaction ID: D11917

Date of Disbursement

09 / 27 / 2007

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. David Scott for Congress

Mailing Address P.O. Box 960821

City Riverdale State GA Zip Code 30296

Purpose of Disbursement
Contribution

Candidate Name
David Scott

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: GA District: 13

Transaction ID: D11931

Date of Disbursement

09 / 27 / 2007

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional)

9000.00

TOTAL This Period (last page this line number only)

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

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

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Yarmuth for Congress

Mailing Address 1815 Brownsboro Road
Suite 100

City Louisville State KY Zip Code 40206

Purpose of Disbursement
Contribution

Candidate Name
John Yarmuth

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: KY District: 03

Transaction ID: D11910

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. The Committee to Re-Elect Artur Davis to Congress

Mailing Address P.O. Box 1845

City Birmingham State AL Zip Code 35201

Purpose of Disbursement
Contribution

Candidate Name
Artur G. Davis

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: AL District: 07

Transaction ID: D11927

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. Paul Hodes for Congress

Mailing Address 26 South Main Street

City Concord State NH Zip Code 03301

Purpose of Disbursement
Contribution

Candidate Name
Paul Hodes

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: NH District: 02

Transaction ID: D11914

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

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

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

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Carol Shea-Porter for Congress

Mailing Address P.O. Box 453

City Rochester State NH Zip Code 03866

Purpose of Disbursement
Contribution

Candidate Name
Carol Shea-Porter

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: NH District: 01

Transaction ID: D11913

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. Friends Of Mark Warner

Mailing Address 201 North Union
Suite 350

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Contribution

Candidate Name
Mark Warner

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: VA District:

Transaction ID: D11950

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Friends Of Mark Warner

Mailing Address 201 North Union
Suite 350

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Contribution

Candidate Name
Mark Warner

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: VA District:

Transaction ID: D11951

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

14000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Fattah For Congress

Mailing Address 3900 Ford Road
Suite 12-O

City Philadelphia State PA Zip Code 19131

Purpose of Disbursement
Contribution

Candidate Name
Chaka Fattah

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 02

Transaction ID: D11941

Date of Disbursement

09 / 27 / 2007

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. Citizens for Rush

Mailing Address P.O. Box 7292

City Chicago State IL Zip Code 60680

Purpose of Disbursement
Contribution

Candidate Name
Bobby Lee Rush

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 01

Transaction ID: D11932

Date of Disbursement

09 / 27 / 2007

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. New Hampshire Democratic Party

Mailing Address 2 1/2 Beacon Street

City Concord State NH Zip Code 03301

Purpose of Disbursement
2007 Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11854

Date of Disbursement

07 / 26 / 2007

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

13000.00

TOTAL This Period (last page this line number only)

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

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

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Tom Allen for Senate

Mailing Address 550 Forest Avenue
Suite 101

City Portland State ME Zip Code 04112

Purpose of Disbursement
Contribution

Candidate Name
Thomas H. Allen

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: ME District:

Transaction ID: D11955

Date of Disbursement

09 / 25 / 2007

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Tom Allen for Senate

Mailing Address 550 Forest Avenue
Suite 101

City Portland State ME Zip Code 04112

Purpose of Disbursement
Contribution

Candidate Name
Thomas H. Allen

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: ME District:

Transaction ID: D11954

Date of Disbursement

09 / 25 / 2007

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Chet Edwards for Congress

Mailing Address PO Box 23273

City Waco State TX Zip Code 76702

Purpose of Disbursement
Contribution

Candidate Name
Chet Edwards

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: TX District: 17

Transaction ID: D11919

Date of Disbursement

09 / 27 / 2007

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Braley For Congress

Mailing Address P.O. Box 390

City
Waterloo

State
IA

Zip Code
50704

Purpose of Disbursement
Contribution

Candidate Name
Bruce L. Braley

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: IA District: 01

Transaction ID: D11903

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. Al Green For Congress

Mailing Address P.O. Box 20174

City
Houston

State
TX

Zip Code
77225

Purpose of Disbursement
Contribution

Candidate Name
Alexander Green

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: TX District: 09

Transaction ID: D11942

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. Kilroy for Congress

Mailing Address 929 Harrison Avenue
Suite 305

City
Columbus

State
OH

Zip Code
43215

Purpose of Disbursement
Contribution

Candidate Name
Mary Jo Kilroy

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 15

Transaction ID: D11924

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

13000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Gutierrez For Congress

Mailing Address 2146 West Churchill Street

City Chicago State IL Zip Code 60647

Purpose of Disbursement
Contribution

Candidate Name
Luis V. Gutierrez

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 04

Transaction ID: D11947

Date of Disbursement

09 / 27 / 2007

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. Joe Donnelly for Congress

Mailing Address P.O. Box 1961

City South Bend State IN Zip Code 46634

Purpose of Disbursement
Contribution

Candidate Name
Joe Donnelly

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: IN District: 02

Transaction ID: D11907

Date of Disbursement

09 / 27 / 2007

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Conyers For Congress

Mailing Address 1031 North Edgewood Street

City Arlington State VA Zip Code 22201

Purpose of Disbursement
Contribution

Candidate Name
John Conyers, Jr.

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 14

Transaction ID: D11937

Date of Disbursement

09 / 27 / 2007

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Lampson for Congress

Mailing Address P.O. Box 58606

City
Houston

State
TX

Zip Code
77258

Purpose of Disbursement
Contribution

Candidate Name
Nick Lampson

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: TX District: 22

Transaction ID: D11920

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Cummings for Congress Campaign Committee

Mailing Address P.O. Box 1631

City
Baltimore

State
MD

Zip Code
21203

Purpose of Disbursement
Contribution

Candidate Name
Elijah E. Cummings

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MD District: 07

Transaction ID: D11936

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. Lautenberg for Senate

Mailing Address Gateway One
23rd Floor

City
Newark

State
NJ

Zip Code
07102

Purpose of Disbursement
Contribution

Candidate Name
Frank Lautenberg

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: NJ District:

Transaction ID: D11926

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Friends of Senator Carl Levin

Mailing Address 10 G Street, N.E.
Suite 470

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contribution

Candidate Name
Carl Levin

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District:

Transaction ID: D11958

Date of Disbursement

09 / 25 / 2007

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. John Salazar for Congress

Mailing Address PO Box 534

City Pueblo State CO Zip Code 81002

Purpose of Disbursement
Contribution

Candidate Name
John Salazar

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CO District: 03

Transaction ID: D11946

Date of Disbursement

09 / 27 / 2007

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. Jeanne Shaheen For Senate

Mailing Address P.O. Box 1510

City Manchester State NH Zip Code 03105

Purpose of Disbursement
Contribution

Candidate Name
Jeanne Shaheen

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NH District:

Transaction ID: D11948

Date of Disbursement

10 / 02 / 2007

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

14000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Hoosiers for Hill

Mailing Address P.O. Box 1071

City
Seymour

State
IN

Zip Code
47274

Purpose of Disbursement
Contribution

Candidate Name
Baron Hill

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: IN District: 09

Transaction ID: D11909

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Friends of Dennis Cardoza

Mailing Address P.O. Box 2749

City
Merced

State
CA

Zip Code
95340

Purpose of Disbursement
Contribution

Candidate Name
Dennis Cardoza

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 18

Transaction ID: D11899

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. Tim Walz for U.S. Congress

Mailing Address P.O. Box 938

City
Mankato

State
MN

Zip Code
56002

Purpose of Disbursement
Contribution

Candidate Name
Tim Walz

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 01

Transaction ID: D11912

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Klein for Congress

Mailing Address 21301 Powerline Road
Suite 204

City Boca Raton State FL Zip Code 33433

Purpose of Disbursement
Contribution

Candidate Name
Ron Klein

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 22

Transaction ID: D11902

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. Zack Space for Congress Committee

Mailing Address 714 North Wooster Avenue

City Dover State OH Zip Code 44622

Purpose of Disbursement
Contribution

Candidate Name
Zachary T. Space

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 18

Transaction ID: D11915

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Tim Johnson for South Dakota

Mailing Address P.O. Box 1859

City Sioux Falls State SD Zip Code 57101

Purpose of Disbursement
Contribution

Candidate Name
Tim Johnson

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: SD District:

Transaction ID: D11959

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

11500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Citizens for Eleanor Holmes Norton

Mailing Address 2201 Wisconsin Avenue, NW
Suite 320

City Washington State DC Zip Code 20007

Purpose of Disbursement
Contribution

Candidate Name
Eleanor Holmes Norton

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: DC District: 00

Transaction ID: D11929

Date of Disbursement

09 / 27 / 2007

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. Sanford D. Bishop, Jr. for Congress

Mailing Address P.O. Box 909

City Columbus State GA Zip Code 31902

Purpose of Disbursement
Contribution

Candidate Name
Sanford D. Bishop, Jr.

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: GA District: 02

Transaction ID: D11930

Date of Disbursement

09 / 27 / 2007

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. Ellison for Congress

Mailing Address P.O. Box 11818

City Minneapolis State MN Zip Code 55411

Purpose of Disbursement
Contribution

Candidate Name
Keith Ellison

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 05

Transaction ID: D11938

Date of Disbursement

09 / 27 / 2007

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional)

12000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Carney for Congress

Mailing Address P.O. Box 38

City Dimock State PA Zip Code 18816

Purpose of Disbursement
Contribution

Candidate Name
Chris Carney

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 10

Transaction ID: D11918

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Melissa Bean for Congress

Mailing Address 203 Frances Lane

City Barrington State IL Zip Code 60010

Purpose of Disbursement
Contribution

Candidate Name
Melissa L. Bean

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 08

Transaction ID: D11906

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. Bobby Scott For Congress

Mailing Address P.O. Box 251

City Newport News State VA Zip Code 23607

Purpose of Disbursement
Contribution

Candidate Name
Robert C. Scott

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: VA District: 03

Transaction ID: D11943

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Daskas For Congress

Mailing Address P.O. Box 91528

City
HendersonState
NVZip Code
89009Purpose of Disbursement
ContributionCandidate Name
Robert James DaskasCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NV District: 03

Transaction ID: D11923

Date of Disbursement

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

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Friends Of Joe BacaMailing Address 555 Capitol Mall
Suite 1425City
SacramentoState
CAZip Code
95814Purpose of Disbursement
ContributionCandidate Name
Joe BacaCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 43

Transaction ID: D11945

Date of Disbursement

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

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. Jesse Jackson, Jr. for Congress

Mailing Address P.O. Box 490286

City
ChicagoState
ILZip Code
60649Purpose of Disbursement
ContributionCandidate Name
Jesse L. Jackson, Jr.Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 02

Transaction ID: D11933

Date of Disbursement

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

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional)

13000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)
 Hopefund, Inc.

A. Full Name (Last, First, Middle Initial) Ellsworth for Congress Committee		Transaction ID: D11908 Date of Disbursement <div> <div>09</div> <div>27</div> <div>2007</div> </div>	
Mailing Address P.O. Box 62		Amount of Each Disbursement this Period <div>2500.00</div>	
City Evansville	State IN		Zip Code 47708
Purpose of Disbursement Contribution			<div>Category/ Type</div>
Candidate Name Brad Ellsworth			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: IN District: 08			
B. Full Name (Last, First, Middle Initial) Friends of Bennie Thompson		Transaction ID: D11940 Date of Disbursement <div> <div>09</div> <div>27</div> <div>2007</div> </div>	
Mailing Address P.O. Box 100		Amount of Each Disbursement this Period <div>4000.00</div>	
City Bolton	State MS		Zip Code 39041
Purpose of Disbursement Contribution			<div>Category/ Type</div>
Candidate Name Bennie G. Thompson			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MS District: 02			
C. Full Name (Last, First, Middle Initial) Clay, Jr. for Congress		Transaction ID: D11939 Date of Disbursement <div> <div>09</div> <div>27</div> <div>2007</div> </div>	
Mailing Address P.O. Box 4544 Suite 300		Amount of Each Disbursement this Period <div>4000.00</div>	
City Saint Louis	State MO		Zip Code 63108
Purpose of Disbursement Contribution			<div>Category/ Type</div>
Candidate Name William Lacy Clay, Jr.			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MO District: 01			

SUBTOTAL of Disbursements This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Friends of Max Baucus

Mailing Address P.O. Box 586

City
Helena

State
MT

Zip Code
59624

Purpose of Disbursement
Contribution

Candidate Name
Max Baucus

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: MT District:

Transaction ID: D11925

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. Julia Carson for Congress Committee

Mailing Address P.O. Box 44088

City
Indianapolis

State
IN

Zip Code
46244

Purpose of Disbursement
Contribution

Candidate Name
Julia Carson

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: IN District: 07

Transaction ID: D11935

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. Citizens For Altmire

Mailing Address P.O. Box 1776

City
Freedom

State
PA

Zip Code
15042

Purpose of Disbursement
Contribution

Candidate Name
Jason Altmire

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 04

Transaction ID: D11916

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Giffords For Congress

Mailing Address P.O. Box 27565

City
Tucson

State
AZ

Zip Code
85726

Purpose of Disbursement
Contribution

Candidate Name
Gabrielle Giffords

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: AZ District: 08

Transaction ID: D11898

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. Loeb sack For Congress

Mailing Address P.O. Box 1457

City
Iowa City

State
IA

Zip Code
52244

Purpose of Disbursement
Contribution

Candidate Name
David Loeb sack

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: IA District: 02

Transaction ID: D11904

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. Udall for Colorado, Inc.

Mailing Address 8690 Wolff Court
Suite 200

City
Westminster

State
CO

Zip Code
80031

Purpose of Disbursement
Contribution

Candidate Name
Mark E. Udall

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CO District:

Transaction ID: D11957

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

13000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Udall for Colorado, Inc.

Mailing Address 8690 Wolff Court
Suite 200

City State Zip Code
Westminster CO 80031

Purpose of Disbursement
Contribution

Candidate Name
Mark E. Udall

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: CO District:

Transaction ID: D11956

Date of Disbursement

M M / D D / Y Y Y Y
09 25 2007

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Moore For Congress

Mailing Address P.O. Box 16646

City State Zip Code
Milwaukee WI 53216

Purpose of Disbursement
Contribution

Candidate Name
Gwendolynne Moore

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: WI District: 04

Transaction ID: D11944

Date of Disbursement

M M / D D / Y Y Y Y
09 27 2007

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. Davis for Congress/Friends of Davis

Mailing Address 5956 West Race Avenue

City State Zip Code
Chicago IL 60644

Purpose of Disbursement
Contribution

Candidate Name
Danny K. Davis

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 07

Transaction ID: D11934

Date of Disbursement

M M / D D / Y Y Y Y
09 27 2007

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional)

13000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Boswell for Congress

Mailing Address PO Box 6220

City
Des Moines

State
IA

Zip Code
50309

Purpose of Disbursement
Contribution

Candidate Name
Leonard Boswell

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: IA District: 03

Transaction ID: D11905

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. Solis for Congress

Mailing Address 6380 Wilshire Boulevard
Suite 1612

City
Los Angeles

State
CA

Zip Code
90048

Purpose of Disbursement
Contribution

Candidate Name
Hilda Solis

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 32

Transaction ID: D11901

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

245000.00

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

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

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Hillsborough County Democrats

Mailing Address 43 Hampshire Drive

City Hudson State NH Zip Code 03051

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11862

Date of Disbursement

M M / D D / Y Y Y Y
07 / 25 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Belknap County Democratic Committee

Mailing Address 70 Cottonwood Avenue

City Laconia State NH Zip Code 03246

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11859

Date of Disbursement

M M / D D / Y Y Y Y
07 / 25 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Janeway For Senate

Mailing Address 225 Tyler Road

City Webster State NH Zip Code 03303

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11876

Date of Disbursement

M M / D D / Y Y Y Y
07 / 25 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Sullivan County Democrats

Mailing Address 10 Spruce Avenue
Suite 1

City Claremont State NH Zip Code 03743

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11863

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Iowa Senate Majority Fund

Mailing Address 5661 Fleur Drive

City Des Moines State IA Zip Code 50321

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11884

Date of Disbursement

/ /

Amount of Each Disbursement this Period

30000.00

Full Name (Last, First, Middle Initial)

C. Iowa House Truman Fund

Mailing Address 5661 Fleur Drive

City Des Moines State IA Zip Code 50321

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11883

Date of Disbursement

/ /

Amount of Each Disbursement this Period

30000.00

SUBTOTAL of Disbursements This Page (optional)

61000.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Rockingham County Democrats

Mailing Address 78 Hayden Circle

City
Hampton

State
NH

Zip Code
03842

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11864

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Iris Estabrook Campaign for State Senate

Mailing Address 8 Burnham Avenue

City
Durham

State
NH

Zip Code
03824

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11871

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Habitat For Humanity International

Mailing Address 121 Habitat Street

City
Americus

State
GA

Zip Code
31709

Purpose of Disbursement
Donation

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11890

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Committee To Elect Todd Rutherford

Mailing Address 2321 Lincoln Street

City Columbia State SC Zip Code 29201

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11896

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. John Shea

Mailing Address 8 McIntire Road

City Nelson State NH Zip Code 03457

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11869

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Carroll County Democrats

Mailing Address 162 School Street

City Effingham State NH Zip Code 03882

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11858

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Strafford County Democratic Committee

Mailing Address 8 Burnham Avenue

City Durham State NH Zip Code 03824

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11855

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Merrimack County Democrats

Mailing Address 63 Horse Corner Road

City Chichester State NH Zip Code 03258

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11860

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. John West For Senate

Mailing Address 202 McCants Drive

City Moncks Corner State SC Zip Code 29461

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11897

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Grafton County Democrats

Mailing Address 14 Conant Road

City
Hanover

State
NH

Zip Code
03755

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11856

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Hollingsworth For Executive Council

Mailing Address 209 Winnacunnet Road

City
Hampton

State
NH

Zip Code
03842

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11867

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Cheshire County Democratic Committee

Mailing Address 1 Shedd Hill Road

City
Stoddard

State
NH

Zip Code
03464

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11861

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. New Hampshire For John Lynch

Mailing Address 1000 Elm Street
17th Floor

City Manchester State NH Zip Code 03101

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11868

Date of Disbursement

07 / 25 / 2007

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. New Hampshire For John Lynch

Mailing Address 1000 Elm Street
17th Floor

City Manchester State NH Zip Code 03101

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11960

Date of Disbursement

08 / 09 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Friends Of Jackie Cilley

Mailing Address 2 Oak Hill Road

City Barrington State NH Zip Code 03825

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11872

Date of Disbursement

07 / 25 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Sgambati 4 NH Senate

Mailing Address 25 Pine Street

City Tilton State NH Zip Code 03276

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11874

Date of Disbursement

07 / 25 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Committee To Elect Lou D'Allesandro

Mailing Address 332 St. James Avenue

City Manchester State NH Zip Code 03102

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11875

Date of Disbursement

07 / 25 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Maggie '08

Mailing Address 48 Court Street

City Exeter State NH Zip Code 03833

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11873

Date of Disbursement

07 / 25 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Friends Of A Democratic Senate

Mailing Address 152 Middle Street

City Portsmouth State NH Zip Code 03801

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11865

Date of Disbursement

07 / 25 / 2007

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

B. Committee To Elect House Democrats

Mailing Address 35 Middle Road

City Portsmouth State NH Zip Code 03801

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11866

Date of Disbursement

07 / 25 / 2007

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

C. Coos County Democrats

Mailing Address 191 Emery Street

City Berlin State NH Zip Code 03570

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11857

Date of Disbursement

07 / 25 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

31000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Hopefund, Inc.

Full Name (Last, First, Middle Initial)

A. Martha Fuller Clark for State Senate

Mailing Address 152 Middle Street

City
Portsmouth

State
NH

Zip Code
03801

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11870

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Sellers For House

Mailing Address 4231 Voorhees Road

City
Denmark

State
SC

Zip Code
29042

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D11895

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

123000.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 60 / 61

FOR LINE NUMBER:
(check only one)☒ 9
☐ 10NAME OF COMMITTEE (In Full)
Hopefund, Inc.**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Obama For AmericaNature of Debt (Purpose):
Telephone Service

Mailing Address P.O. Box 8102

City State ZIP Code
Chicago IL 60680

Outstanding Balance Beginning This Period

5147.76

Transaction ID: C604301

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5147.76

1) **SUBTOTALS** This Period This Page (optional)..... ▶

5147.76

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

5147.76

3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Hopefund, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
American ExpressNature of Debt (Purpose):
Credit Card

Mailing Address PO Box 260002

City State ZIP Code
Fort Lauderdale FL 33336-0001

Outstanding Balance Beginning This Period

17384.98

Transaction ID: D11851

Amount Incurred This Period

0.00

Payment This Period

17384.98

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Consolidated Printing Company, Inc.Nature of Debt (Purpose):
Printing

Mailing Address 4042 N Nashville Ave

City State ZIP Code
Chicago IL 60634-1427

Outstanding Balance Beginning This Period

2517.44

Transaction ID: D11852

Amount Incurred This Period

490.23

Payment This Period

3007.67

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

0.00

2) **TOTALS** This Period (last page this line number only).....

0.00

3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)