01/31/2011 11:55

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## FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT 430 SOUTH CAPITOL STREET SE ADDRESS (number and street) Check if different than previously WASHINGTON DC 20003 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** C00460147 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12S) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Χ Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 23 2010 12 3 1 2010 1 1 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. **ANDREW TOBIAS** Type or Print Name of Treasurer Electronically Filed by **ANDREW TOBIAS** 0 1 3 1 2011 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

FEC Form 3X (Rev. 02/2003)

## **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

2 / 260

Write or Type Committee Name DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

" D 23 2010 12 31 2010 11 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2010° 346040.89 January 1 (b) Cash on Hand at 1805254.78 Begining of Reporting Period ..... 144935.52 3541525.23 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 1950190.30 3887566.12 6(a) and 6(c) for Column B) ..... 484277.67 2421653.49 Total Disbursements (from Line 31) ..... Cash on Hand at Close of Reporting Period 1465912.63 1465912.63 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

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

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

### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 260

Write or Type Committee Name

DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Report Covering the Period: From:

M M M 1 1 2 3 2 3 2 0 1 0 To:

To:

M M M 1 2 3 2 0 1 0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:     (a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	0.00	0.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
Transfers From Affiliated/Other     Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
Loan Repayments Received      Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	144935.52	3541525.23
to Federal candidates and Other Political Committees	0.00	0.00
7. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
8. 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
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	144935.52	3541525.23
Total Federal Receipts     (subtract Line 18(c) from Line 19)	144935.52	3541525.23

### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 260

	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	484277.67	2421653.49
	Expenditures(c) Total Operating Expenditures	404271.07	2421000.49
	(add 21(a)(i), (a)(ii) and (b))	484277.67	2421653.49
22.	Transfers to Affiliated/Other Party	0.00	0.00
23.	Committees Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	0.00	0.00
24.	Independent Expenditure	0.00	0.00
25.	(use Schedule E)	0.00	
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
	Loans Made  Refunds of Contributions To:	0.00	0.00
-0.	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))	0.00	0.00
29.	Other Disbursements	0.00	0.00
30.	Federal Election Activity (2 U.S.C 431(20))		
٠.	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely	0.00	0.00
	With Federal Funds		3.00
	(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))	484277.67	2421653.49
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	484277.67	2421653.49

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 260

III. Net Contributions/Operating Expenditures					
33.	Total Contributions (other than loans) from Line 11(d), page 3)	0.00	0.00		
84.	Total Contribution Refunds (from Line 28(d))	0.00	0.00		
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00		
6.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	484277.67	2421653.49		
7.	Offsets to Operating Expenditures (from Line 15, page 3)	144935.52	3541525.23		
88.	Net Operating Expenditures (subtract Line 37 from Line 36)	339342.15	-1119871.74		

FE6AN026

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 260 (check only one)  11a 11b 11c 12 13 14 X 15 16
or for commercial purposes, other than using t	d Statements may not be sold or used by any per- the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMIT	TTEE - TRAVEL OFFSET ACCOUNT	
Full Name (Last, First, Middle Initial) Illinois Senate 2010		Date of Receipt
Mailing Address 120 Maryland Avenu	State Zip Code	12 08 2010
City Washington	DC 20002	Transaction ID: SA15-2567  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	43062.93
Name of Employer	Occupation	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 43062.93	
Full Name (Last, First, Middle Initial) ALEXI for ILLINOIS Mailing Address 11 S LaSalle St., Su	ite 2400	Date of Receipt
		12 15 2010
Chicago	State Zip Code	Transaction ID: SA15-2570
Chicago  FEC ID number of contributing federal political committee.	IL 60603	Amount of Each Receipt this Period  13400.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 39423.07	
Full Name (Last, First, Middle Initial) COAKLEY FOR SENATE		Date of Receipt
Mailing Address 120 Prospect Street		1 2 1 5 2 0 1 0
City	State Zip Code	Transaction ID: SA15-2568
Ashland	MA 01721	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1705.97
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 35033.20	
SUBTOTAL of Receipts This Page (optional)	•	58168.90

## SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 260 (check only one)  11a 11b 11c 12 13 14 X 15 16 17
NAME OF COMMITTEE (In Full)	I Statements may not be sold or used by any personal Statements may not be sold or used by any personal he name and address of any political committee to TTEE - TRAVEL OFFSET ACCOUNT	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MINNESOTA DFL PARTY Mailing Address 255 East Plato Blvd  City St. Paul  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary General Other (specify)	State Zip Code MN 55107  C Occupation  Aggregate Year-to-Date  19710.28	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) DNC SERVICES CORP.  Mailing Address 430 SOUTH CAPITO  City WASHINGTON  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary General Other (specify)		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) DNC SERVICES CORP.  Mailing Address 430 SOUTH CAPITO  City WASHINGTON  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary General Other (specify)	DL ST SE  State Zip Code DC 20003  C  Occupation  Aggregate Year-to-Date ▼  940294.93	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
SUBTOTAL of Receipts This Page (optional)		86766.62
TOTAL This Period (last page this line numb	er only)	144935.52

C.

age# 11990120003			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only X 21b 27	NUMBER: PAGE 8 / 260 / one)  22
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam		by any person f	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACCO	UNT	
Full Name (Last, First, Middle Initial) AMERICAN EXPRESS			Transaction ID: SB21B-2507 Date of Disbursement
Mailing Address P O BOX 1270			111 D 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City NEWARK	State Zip Code NJ 07101		Amount of Each Disbursement this Period
Purpose of Disbursement Prepaid Expenses Candidate Name		0.1	50000.00
		Category/ Type	
Office Sought:  Senate  President  State:  Disburse  Disburse	ement For: Primary General Other (specify)		See Attached Memo Entry
Full Name (Last, First, Middle Initial) AirTran Airways Mailing Address 9955 AirTran Blvd.			Transaction ID: SB21B-2507-10000 Date of Disbursement  M M M / D D D / Y Y Y O Y O Y O Y O Y O Y O Y O Y O Y
City	State Zip Code		Amount of Each Disbursement this Period
Orlando Purpose of Disbursement	FL 32827		-348.20
Airfare Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		[MEMO ITEM] Memo Entry
Full Name (Last, First, Middle Initial) Alaska Airlines			Transaction ID: SB21B-2507-20000 Date of Disbursement
Mailing Address P.O. Box 24948			111 D 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Seattle	State Zip Code WA 98124-0948		Amount of Each Disbursement this Period
Purpose of Disbursement Airfare			599.10
Candidate Name		Category/ Type	[MEMO ITEM]
Office Sought: House Disbursi Senate President	ement For: Primary General Other (specify)		Memo Entry
State: District:			
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	50000.00

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	NUMBER: PAGE 9/260
ITEMIZED DISBURSEMENTS	for each category of the	(check only	
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	e and address of any political t	Committee to so	met contributions from such committee
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	TNUC	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2507-30000
American Airlines			Date of Disbursement
Mailing Address 4333 Amon Carter Boule	vard		111 / 23 / 2010
•	State Zip Code TX 76155		Amount of Each Disbursement this Period
Purpose of Disbursement Airfare			12406.50
Candidate Name		Category/	
		Туре	[MEMO ITEM]
Office Sought: House Disburse Senate	ment For:    Primary   General   Gen		Memo Entry
President	Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) Amtrak			Transaction ID: SB21B-2507-40000 Date of Disbursement
Mailing Address Union Station			11 23 7 2010
Mailing Address Union Station 50 Massachusetts Ave., I	NE		
•	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement			5324.60
Train Travel Candidate Name		Category/	
		Type	[MEMO ITEM]
Office Sought: House Disburse Senate	ment For:    Primary   General		Memo Entry
President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) AVIS-RENT-A-CAR			Transaction ID: SB21B-2507-50000 Date of Disbursement
Mailing Address 1 BENNETT STREET			111 23 7 2010
	State Zip Code MA 02135		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental			249.23
Candidate Name		Category/	
Office Sought: House Disburse	ment For:	Туре	[MEMO ITEM]
Senate	Primary General		Memo Entry
State: President State:	Other (specify)		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	0.00

C.

CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	NUMBER: PAGE 10 / 260 y one)
LIMIZED DISDOTISEMENTS	Detailed Summary Page	X 21b 27	22 23 24 25 2 28a 28b 28c 29
ny Information copied from such Reports and Staten	nents may not be sold or used by		
for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCOU	JNT	
Full Name (Last, First, Middle Initial) Avis Rent-A-Car			Transaction ID: SB21B-2507-60000 Date of Disbursement
Mailing Address 3843 Dickerson Road			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 2 & 3 \\ & 2 & 3 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ & 2 & 0 & 1 & 0 \end{smallmatrix} $
City Charlottesville	State Zip Code VA 22901		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental		•	2142.82
Candidate Name		Category/ Type	MENO ITEM
Senate President	ement For: Primary General Other (specify)		[MEMO ITEM] Memo Entry
State: District:			
Full Name (Last, First, Middle Initial) AVIS-RENT-A-CAR			Transaction ID: SB21B-2507-70000 Date of Disbursement
Mailing Address 214 N CLARK ST.			$\begin{bmatrix} \begin{smallmatrix} M & 1 & M \\ 1 & 1 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City CHICAGO	State Zip Code IL 60601		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental	I	•	1831.99
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)	1,700	[MEMO ITEM] Memo Entry
State: District:			
Full Name (Last, First, Middle Initial) Avis Rent-A-Car			Transaction ID: SB21B-2507-80000 Date of Disbursement
Mailing Address 19601 Maplewood Avenu	ie		111 / 23 / Y 2010 Y
City Cleveland	State Zip Code OH 44135		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental			3336.02
Candidate Name		Category/ Type	IMENO ITEM
Senate President	ement For: Primary General Other (specify)		[MEMO ITEM] Memo Entry
State: District:			

CHEDULE B (FEC Form 3) FEMIZED DISBURSEMENTS	/ Use separate scr	of the '	FOR LINE NUMB (check only one)  X 21b 22 27 28	23 24 25 2
ny Information copied from such Reports and for commercial purposes, other than using t			any person for the	purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMI	TTEE - TRAVEL OFFSE	T ACCOU	NT	
Full Name (Last, First, Middle Initial) AVIS-RENT-A-CAR			Dat	nsaction ID: SB21B-2507-90000 te of Disbursement
Mailing Address 213 E RICH STRE	ET		1 <sup>M</sup>	
City COLUMBUS	State Zip Co OH 4321		Am	nount of Each Disbursement this Period
Purpose of Disbursement Car Rental				1284.88
Candidate Name		C	ategory/ Type	
Senate President	Disbursement For:  Primary  Other (specify)	General		EMO ITEM] mo Entry
State: District:  Full Name (Last, First, Middle Initial)			Tro	nsaction ID: SB21B-2507-10000
AVIS-RENT-A-CAR				te of Disbursement
Mailing Address Denver Intl Airport 25500 East 78th A	1	1 M / D23 / Y Y Y Y Y Y		
City Denver	State Zip Co CO 8024		Am	nount of Each Disbursement this Period
Purpose of Disbursement Car Rental			L	2281.26
Candidate Name			ategory/ Type	EMO ITEM]
Office Sought: House Senate President State: District:	Disbursement For:  Primary  Other (specify) ▼	General	-	mo Entry
Full Name (Last, First, Middle Initial) Avis Rent-A-Car			Dat	nsaction ID: SB21B-2507-11000 te of Disbursement
Mailing Address 11000 Airport Roa	1 <sup>M</sup>	1 M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Dubuque	State Zip Co		Am	ount of Each Disbursement this Period
Purpose of Disbursement Car Rental		515.99		
Candidate Name	ategory/ Type			
Office Sought: House I Senate President	Disbursement For:  Primary  Other (specify)	General	[ME	EMO ITEM] mo Entry
State: District:				

В.

C.

SCHEDULE B (FEC Form 3X)		EOD LINE	NUMBER: PAGE 12 / 260
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check onl	
TI EMIZED DISDOTISEMENTS	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem			
or for commercial purposes, other than using the name	e and address of any political	committee to so	olicit contributions from such committee
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2507-120000
Avis Rent-A-Car			Date of Disbursement
Mailing Address 202 Porter Street			1 1 M
•	State Zip Code MA 02128		Amount of Each Disbursement this Period
Purpose of Disbursement	02120		1512.69
Car Rental			
Candidate Name		Category/ Type	
Office Sought: House Disburse	ment For:	туре	[MEMO ITEM]
Senate	Primary General		Memo Entry
President	Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
Avis Rent-A-Car			Transaction ID: SB21B-2507-130000 Date of Disbursement
McTron Address B. C. L. D. L. L. L.			11
Mailing Address Dane County Regional Ai 4000 International Lane	irport		23 2010
•	State Zip Code WI 53704		Amount of Each Disbursement this Period
Purpose of Disbursement		• •	135.00
Car Rental Candidate Name		0.1	
Candidate Name		Category/ Type	(MEMO ITEM)
	ment For:		[MEMO ITEM]  Memo Entry
Senate   President	Primary General Other (specify) ▼		
State: District:	Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2507-140000
AVIS RENT A CAR			Date of Disbursement
Mailing Address 367 S WILLOW STREET	-		1 1 M
•	State Zip Code NH 03103		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental			296.40
Candidate Name		Category/	
Office Sought: House Disburse	ment For:	Туре	[MEMO ITEM]
Senate	Primary General		Memo Entry
President	Other (specify)		
State: District:			
SUBTOTAL of Disbursements This Page (optional) .			0.00

		B (FEC Form	•		arate schedule(s)				INE N	NUMBE	R:		Р	AGE	13 /	260
17	EMIZED DI	SBURSEMEN	115		category of the Summary Page		X	21k		22 28a		23 28b	24 28c		25 29	2 3
		ed from such Reports rposes, other than us														s
Λ	NAME OF COM	, ,														
$\mathbb{Z}$	DEMOCRATIO	C NATIONAL COM	MITTEE -	TRAVEL	OFFSET ACC	OU	NT									
	Full Name (Last, Avis Rent-A-C	First, Middle Initial) ar										isburs		B-2	507-1	50000
	Mailing Address	Tweed-New Ha		t						1 <sup>M</sup> 1	М	/ D2	23 /	Y	0 1 (	0 Y
	City New Haven			State CT	Zip Code 06510					Amou	nt o	f Each	Disburs		-	
	Purpose of Disbu Car Rental	ursement				Г		•	1	L.		-		,6	89.54	4
	Candidate Name						atego Type			FR4 = R4	<b>Ω</b> Ι	TEM				
	Office Sought:	House Senate President	Disburse	ment For: Primary Other (sp	General ecify) ▼					Memo		_				
_	State:	District:														
	Full Name (Last, First, Middle Initial) Avis Rent-A-Car								Date	of D	isburs					
	Mailing Address 220 West 31st Street								1 1	М	/ D2	3 /	Ý	01	0 Y	
	City New York			State NY	Zip Code 10001					Amount of Each Disbursement this Period						Period
	Purpose of Disbu Car Rental	Purpose of Disbursement Car Rental						•	1	L.		-		Ğ	54.10	5
	Candidate Name	Candidate Name						ory/ e		MEMO ITEMI						
	Office Sought:	House Senate President	Disburse	ment For: Primary Other (sp	General ecify) ▼					[MEMO ITEM] Memo Entry						
	State:	District:														
	Full Name (Last, Avis-Rent-A-C	First, Middle Initial) ar										ion ID: isburs	SB21 ement	B-2	507-1	70000
	Mailing Address	Philadelphia In								<b>1</b> 1	М	/ D2	23 /	Y 2	2 0 1 (	0 Y
	City Philadelphia			State PA	Zip Code 19153					Amou	nt o	f Each	Disburs			
	Purpose of Disbu Car Rental	Purpose of Disbursement Car Rental												21	12.93	3
	Candidate Name	Candidate Name						ory/ e								
	Office Sought:	House Senate President	Disburse	ment For: Primary Other (sp	☐ General					[MEM		_				
	State:	District:		(56	<i>37</i> / ₩											

	CHEDULE B (FEC Form 3X)	Use separate schedul		FOR LINE	NUMBER: PAGE 14 / 260
TI	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Pa		X 21b 27	22 23 24 25 2 28a 28b 28c 29
	y Information copied from such Reports and Stator commercial purposes, other than using the r				
	NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTE	E - TRAVEL OFFSET A	CCOL	JNT	
	Full Name (Last, First, Middle Initial) Avis Rent-A-Car				Transaction ID: SB21B-2507-18000 Date of Disbursement
	Mailing Address Pittsburgh Intl Airport 115 Rental Car Acces	s Road			111
	City Pittsburgh	State Zip Code PA 15231			Amount of Each Disbursement this Perio
	Purpose of Disbursement Car Rental			•	266.67
	Candidate Name		7	Category/ Type	
	Office Sought:  House Senate President  State:  Disb	Турс	[MEMO ITEM] Memo Entry		
	Full Name (Last, First, Middle Initial) AVIS-RENT-A-CAR		Transaction ID: SB21B-2507-1900 Date of Disbursement		
	Mailing Address 7000 NE AIRPORT V	1 1 1 D 2 3 Y 2 0 1 0 Y			
	City PORTLAND		Amount of Each Disbursement this Perio		
	Purpose of Disbursement Car Rental	OR 97218	Тг	•	506.81
	Candidate Name	Category/ Type			
	Office Sought: House Disb Senate President State: District:	ursement For: Primary Gene Other (specify) ▼	ral		[MEMO ITEM] Memo Entry
	Full Name (Last, First, Middle Initial) Avis Rent-A-Car				Transaction ID: SB21B-2507-2000 Date of Disbursement
	Mailing Address Lucas Drive Middlebe Building 295		1 1 M / D 2 3 / Y 2 0 1 0 Y		
	City Detroit	State Zip Code MI 48242			Amount of Each Disbursement this Perio
	Purpose of Disbursement Car Rental		149.23		
	Candidate Name	Category/ Type			
	Office Sought: House Disb Senate President	ursement For: Primary Gene Other (specify)	ral	,	[MEMO ITEM] Memo Entry
	State: District:	Cirioi (apeciiy)			

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SCHEDULE B (FEC Form 3X)	11	FOR LINE	NUMBER: PAGE 15 / 260
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
THE MILES BIODOTTOLINETTO	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) Avis-Rent-A-Car			Transaction ID: SB21B-2507-210000 Date of Disbursement
Mailing Address Seattle Tacoma Intl Airpo	t		$\begin{bmatrix} M & M & M \\ 1 & 1 & M \end{bmatrix} / \begin{bmatrix} D & D & D \\ 2 & 3 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}^{Y}$
	State Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement	WA 98158	-	372.40
Car Rental Candidate Name		Category/	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	Туре	[MEMO ITEM] Memo Entry
State: District:			
Full Name (Last, First, Middle Initial) AVIS-RENT-A-CAR			Transaction ID: SB21B-2507-220000 Date of Disbursement
Mailing Address 411 Minnesota St			$ \begin{bmatrix} M & M \\ 1 & 1 \end{bmatrix} \begin{bmatrix} D & D & D \\ 2 & 3 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $
•	State Zip Code MN 55101		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental			431.30
Candidate Name		Category/ Type	IMEMO ITEMI
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		[MEMO ITEM] Memo Entry
State: District:			
Full Name (Last, First, Middle Initial) Avis Rent-A-Car			<b>Transaction ID:</b> SB21B-2507-230000 Date of Disbursement
Mailing Address Toledo Express Airport 11013 Airport Highway			$\begin{bmatrix} M & M & M \\ 1 & 1 & M \end{bmatrix} / \begin{bmatrix} D & D \\ D & 3 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ Q & 1 & 0 \end{bmatrix} $
City	State Zip Code OH 43558		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental			268.35
Candidate Name		Category/ Type	MENO ITEM
Senate President	ment For: Primary General Other (specify)		[MEMO ITEM] Memo Entry
State: District:			
SURTOTAL of Dishursements This Page (ontional)			0.00

	CHEDULE B (FEC Form 3X) FEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	FOR LINE (check only	NUMBER: PAGE 16 / 260 y one) 22 23 24 25
Aı	ny Information copied from such Reports and St			27 by any person f	28a 28b 28c 29 or the purpose of soliciting contributions
	for commercial purposes, other than using the				
$\bigg >$	NAME OF COMMITTEE (In Full)  DEMOCRATIC NATIONAL COMMITTE	EE - TRAVEL	OFFSET ACCO	UNT	
	Full Name (Last, First, Middle Initial) AVIS-RENT-A-CA				Transaction ID: SB21B-2507-24000 Date of Disbursement
	Mailing Address 2000 POST RD				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ 2 & 3 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
	City WARWICK	State RI	Zip Code 02886		Amount of Each Disbursement this Period
	Purpose of Disbursement Car Rental			•	1056.10
	Candidate Name		,	Category/ Type	MENO ITEM
	Senate President	oursement For: Primary Other (spe	General ecify) ▼		[MEMO ITEM] Memo Entry
	State: District:				
	Full Name (Last, First, Middle Initial) AVIS-RENT-A-CAR				Transaction ID: SB21B-2507-25000 Date of Disbursement
	Mailing Address 1722 M Street, NW				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 3 \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
	City Washington	State DC	Zip Code 20036		Amount of Each Disbursement this Period
	Purpose of Disbursement Car Rental				809.60
	Candidate Name		,	Category/ Type	(MEMO ITEM)
	Office Sought: House Disk Senate President State: District:	oursement For: Primary Other (spe	General ecify) ▼		[MEMO ITEM] Memo Entry
	Full Name (Last, First, Middle Initial) Avis Rent-A-Car				Transaction ID: SB21B-2507-26000 Date of Disbursement
	Mailing Address 100 S French Street				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
	City Wilmington	State DE	Zip Code 19801		Amount of Each Disbursement this Period
	Purpose of Disbursement Car Rental				1306.87
	Candidate Name			Category/	
	Office Sought: House Disk Senate President	oursement For: Primary Other (spe	General ecify) ▼	Туре	[MEMO ITEM] Memo Entry
	State: District:		<i>&gt;</i> / <b>▼</b>		

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NU	
ITEMIZED DISBURSEMENTS	for each category of the  Detailed Summary Page	(check only or X 21b	ne)
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	TDAVEL OFFOFT 4000UN		
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCOUNT	N I	
Full Name (Last, First, Middle Initial) Avis Rent-A-Car Tolls			Transaction ID: SB21B-2507-270000 Date of Disbursement
Mailing Address P.O. Box 222209			1 1 M
	State Zip Code NY 11022		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental			192.66
Candidate Name		ategory/ Type	
Office Sought: House Disburse Senate	ment For:  Primary General	_	MEMO ITEM] Memo Entry
President State: District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)		-	Transaction ID: SB21B-2507-280000
BUDGET-RENT-A-CAR			Date of Disbursement
Mailing Address 1200 AIRPORT DRIVE			1 1 M
•	State Zip Code VT 05403		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental			265.41
Candidate Name		ategory/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼		MEMO ITEM] Memo Entry
State: District:			
Full Name (Last, First, Middle Initial) Budget Rent-A-Car			Transaction ID: SB21B-2507-290000 Date of Disbursement
Mailing Address 10000 Bessie Coleman D	rive		111
•	State Zip Code IL 60666		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental		•	810.07
Candidate Name		ategory/ Type	
Senate	ment For: Primary General	L	MEMO ITEM] Memo Entry
President State: District:	Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional) .		•	0.00

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I	
ITEMIZED DISBURSEMENTS	for each category of the	(check only	one) ] 22
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	UNT	
Full Name (Last, First, Middle Initial) BUDGET RENT-A-CAR			Transaction ID: SB21B-2507-300000 Date of Disbursement
Mailing Address 19601 Maplewood Avenu	e		$ \begin{bmatrix} M & M \\ 1 & 1 \end{bmatrix} \begin{bmatrix} D & D \\ 2 & 3 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $
	State Zip Code OH 44135		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental		•	562.44
Candidate Name	,	Category/ Type	MENO ITEM
Senate President	ment For: Primary General Other (specify)		[MEMO ITEM] Memo Entry
State: District:			
Full Name (Last, First, Middle Initial) Budget Rent-A-Car			Transaction ID: SB21B-2507-310000 Date of Disbursement
Mailing Address Logan Intl Airport 20 Tomahawk Drive			111 D 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
•	State Zip Code MA 02128		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental			238.93
Candidate Name		Category/ Type	[MEMO ITEM]
Senate President	ment For: Primary General Other (specify)		Memo Entry
State: District: Full Name (Last, First, Middle Initial)			IF ODDAD 0507 00000
Budget Rent-A-Car			Transaction ID: SB21B-2507-320000 Date of Disbursement
Mailing Address 88-08 23rd Avenue			$ \begin{bmatrix} M & M \\ 1 & 1 \end{bmatrix} \begin{bmatrix} D & D \\ 2 & 3 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $
	State Zip Code NY 11370		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental			528.15
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	.,,,,,	[MEMO ITEM] Memo Entry
State: District:			
SUBTOTAL of Disbursements This Page (optional)			0.00

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SCHEDULE B (FEC Form 3X)	Han apparet askedule(s)	FOR LINE	NUMBER: PAGE 19 / 260
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	/ one)
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial)			
Budget Rent a Car of Las Vegas			Transaction ID: SB21B-2507-330000 Date of Disbursement
Mailing Address McCarran Intl Airport 7135 Gilespie			M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	State Zip Code NV 89119		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental			4120.92
Candidate Name		Category/ Type	IMENO ITEM
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		[MEMO ITEM] Memo Entry
State: District:			
Full Name (Last, First, Middle Initial) Budget Rent-A-Car			Transaction ID: SB21B-2507-340000 Date of Disbursement
Mailing Address Mitchell Airport 550 W. Grange Avenue			1 1 1 D 2 3 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
•	State Zip Code WI 53207		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental			2352.37
Candidate Name		Category/ Type	IMENO ITEM
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		[MEMO ITEM] Memo Entry
State: District:	, , , , ,		
Full Name (Last, First, Middle Initial) Budget Rent-A-Car			Transaction ID: SB21B-2507-350000 Date of Disbursement
Mailing Address 7150 Humphrey Drive			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 3 \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} \end{bmatrix}$
•	State Zip Code MN 55450		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental		-	277.93
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		[MEMO ITEM] Memo Entry
State: District:			
SURTOTAL of Dishursements This Page (ontional)			0.00

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SCHEDULE B (FEC Form 3X)		arate schedule(s)			FOR LIN			R:			PA	GE	20 /	260	
ITEMIZED DISBURSEMENTS		category of the Summary Page		-	21b 27	Ä	22 28a		23 28b		24 28c	Н	25 29	П	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name														3	
NAME OF COMMITTEE (In Full)	and addre	33 of any politica	0011			501101	t oonti	ibat	10110 11	0111 0	00110	011111	milloo		
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL	OFFSET ACC	OU	N	Т										
Full Name (Last, First, Middle Initial) Budget Rent-A-Car							Trans Date o		ion ID:			3-25	07-3	6000	00
Mailing Address 323 George Street							1 1	М	<sup>/</sup> D <sub>2</sub>	23	/ Y	ž	0 1 (	) <sup>Y</sup>	
•	State CT	Zip Code 06511					Amou	nt o	f Each	n Disl	ourse	men	t this	Perio	d
Purpose of Disbursement Car Rental			Г	_				_				1:	58.88	3	
Candidate Name					egory/ ype	١.	NA = NA	<b>Λ</b> Ι	TENA	1					
Office Sought:  Senate President State:  Disburse	ment For: Primary Other (spe	General ecify) ▼					MEM Memo			ļ					
Full Name (Last, First, Middle Initial) IAN ALBERG							Trans Date of		ion ID:	_		3-17	723		
Mailing Address 1210 N. Taft Street, #705	j						1 1	М	<sup>/</sup> D <sub>2</sub>	2 9	/ <b>Y</b>	ž	010	) <sup>Y</sup>	
	State VA	Zip Code 22201					Amou	nt o	f Each	n Disl	ourse	men	t this	Perio	d
Purpose of Disbursement Travel Expense			Г				<u></u>						53.50	)	
Candidate Name					egory/ ype										
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General <b>▼</b>													
State: District:															
Full Name (Last, First, Middle Initial) IAN ALBERG									isburs	emer				V	
Mailing Address 1210 N. Taft Street, #705	i						1 1 1	IVI	′	29		2	0 1 (	)	
•	State VA	Zip Code 22201					Amou	nt o	f Each	n Disl	ourse	-		-	d
Purpose of Disbursement Travel & Subsistence Expense Reimb			Г					-	-	-	-	2	00.00	)	
Candidate Name					egory/ ype										
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General ecify) ▼													
State: District:		· · ·													
SUBTOTAL of Disbursements This Page (optional) .					<b>•</b>			·				2	53.50	)	

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SCHEDULE B (FEC Form 3X)		FORLINE	NUMBER: DAGE 01/000
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	
II EMIZED DISBURSEMENTS	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) ANDREW BALLARD			Transaction ID: SB21B-1725 Date of Disbursement
Mailing Address 210 M Street, SW			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix}^M \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{smallmatrix} \end{bmatrix}^M \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}^Y$
City Washington	State Zip Code DC 20024		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			50.00
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) ANDREW BALLARD			Transaction ID: SB21B-1726 Date of Disbursement
Mailing Address 210 M Street, SW			$\begin{bmatrix} 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 $
City Washington	State Zip Code DC 20024		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			800.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For:    Primary		
State: District:			
Full Name (Last, First, Middle Initial) Louis A. Beattie, Jr.			Transaction ID: SB21B-1727 Date of Disbursement
Mailing Address P.O. BOX 1206			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City LA CANADA	State Zip Code CA 91012		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			20.00
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District:			
SURTOTAL of Dishursements This Page (optional)			870.00

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SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 22 / 260
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	e and address of any political	Committee to som	cit contributions from such committee
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) Louis A. Beattie, Jr.			Transaction ID: SB21B-1728 Date of Disbursement
Mailing Address P.O. BOX 1206			111 29 2010 Y
Cit.	Ctata Zin Cada		Arranist of Fach Dishuman arrant this David
City LA CANADA	State Zip Code CA 91012		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			400.00
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Ted Berger			Transaction ID: SB21B-1729 Date of Disbursement
Mailing Address 2108 Harlem Blvd			$ \begin{bmatrix} M & M \\ 1 & 1 \end{bmatrix} \begin{bmatrix} D & 2 & 9 \\ 0 & 2 & 9 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $
City Rockford	State Zip Code IL 61103		Amount of Each Disbursement this Period
Purpose of Disbursement			800.00
Travel & Subsistence Expense Reimb  Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)	No.	
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: CD01D 1700
Nicole Black			Transaction ID: SB21B-1730 Date of Disbursement
Mailing Address 6424 Fairbanks Street			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
City New Carrollton	State Zip Code MD 20784		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			35.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	Туре	
State: District:	(-		
SUBTOTAL of Disbursements This Page (optional)			1235.00

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TEMIZED DISBURSEMENTS	nd address of any politica	X 21b 27 d by any person for	22 23 24 25 26 28a 28b 28c 29 30b or the purpose of soliciting contributions
r for commercial purposes, other than using the name at NAME OF COMMITTEE (In Full)  DEMOCRATIC NATIONAL COMMITTEE - TI	nd address of any politica		
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE - TI			icit contributions from such committee
Full Name (Last, First, Middle Initial)		COUNT	
			Transaction ID: SB21B-1731
Nicole Black			Date of Disbursement
Mailing Address 6424 Fairbanks Street			$ \begin{bmatrix} M & M & M \\ 1 & 1 & M \end{bmatrix} / \begin{bmatrix} D & D & D \\ 2 & 9 & M \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $
City Sta New Carrollton MI	•		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			800.00
Candidate Name		Category/ Type	
President	ent For: rimary General ther (specify)		
State: District:  Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1732
ALAN BRAY			Date of Disbursement
Mailing Address 14 Q Street NE, UNIT B			111 29 7 2010
City Sta Washington D0	•		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			100.00
Candidate Name		Category/ Type	
President	ent For: rimary General ther (specify)		
State: District:  Full Name (Last, First, Middle Initial)			
Kristina Broadie			Transaction ID: SB21B-1733 Date of Disbursement
Mailing Address 10606 Pinedale Drive			$\begin{bmatrix}\begin{smallmatrix}M&M&M\\1&1&M\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&D&D\\2&9\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y&Y\\2&0&1&0\end{smallmatrix}\end{bmatrix}$
City Sta Silver Spring MI			Amount of Each Disbursement this Period
Purpose of Disbursement			700.00
Travel & Subsistence Expense Reimb  Candidate Name		Category/ Type	
	ent For: rimary General ther (specify)	I туре	
State: District:	, 		

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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBED.	DACE 04 / 000		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only		PAGE 24 / 260		
TI EMIZED DIODOTTOLINETTO	Detailed Summary Page	X 21b 27		24 25 26 28c 29 30b		
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam						
NAME OF COMMITTEE (In Full)						
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT				
Full Name (Last, First, Middle Initial) KAREN C. BURCHARD			Transaction ID: SI Date of Disbursemen	-		
Mailing Address 2400 Clarendon Blvd, #9	05		111 29	Y 2010 Y		
City Arlington	State Zip Code VA 22201		Amount of Each Disk	oursement this Period		
Purpose of Disbursement Travel Expense				28.21		
Candidate Name		Category/ Type				
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)					
State: District:						
Full Name (Last, First, Middle Initial) KAREN C. BURCHARD			Transaction ID: SI Date of Disbursemen	t		
Mailing Address 2400 Clarendon Blvd, #9	05		11 / 29	2010		
City Arlington	State Zip Code VA 22201		Amount of Each Disk	oursement this Period		
Purpose of Disbursement Travel & Subsistence Expense Reimb				600.00		
Candidate Name		Category/ Type				
Office Sought: House Disburse Senate President	ement For:    Primary					
State: District:						
Full Name (Last, First, Middle Initial) KATHLEEN CAMPBELL			Transaction ID: SI Date of Disbursemen			
Mailing Address 2416 Berkshire Drive			11 29	<sup>'</sup> 2010 <sup>'</sup>		
City Winter Haven	State Zip Code FL 33884		Amount of Each Disk	oursement this Period		
Purpose of Disbursement Travel Expense				51.00		
Candidate Name		Category/ Type				
Senate President	ement For: Primary General Other (specify)					
State: District:						
SURTOTAL of Dishursements This Page (ontional)				679.21		

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one)  22
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE			
/ Full Name (Last, First, Middle Initial)			
KATHLEEN CAMPBELL			Transaction ID: SB21B-1737 Date of Disbursement
Mailing Address 2416 Berkshire Drive			$ \begin{bmatrix} M & M & M \\ 1 & 1 & M \end{bmatrix}  \begin{bmatrix} D & D & D \\ 2 & 9 & M \end{bmatrix}  \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $
City Winter Haven	State Zip Code FL 33884		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			20.00
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1738
KATHLEEN CAMPBELL			Date of Disbursement
Mailing Address 2416 Berkshire Drive			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
City Winter Haven	State Zip Code FL 33884		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			400.00
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) David Ceasar			Transaction ID: SB21B-1739 Date of Disbursement
Mailing Address 1600 S. Eads St., #524N	I		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
City Arlington	State Zip Code VA 22202		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		•	59.35
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)	. 100	
State: District:			
SUBTOTAL of Disbursements This Page (optional)			479.35

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S	CHEDULE B (FEC Form 3X)	Use separate schedule(s	)	FOR LINE	-	:	Р	AGE	26 / 26	50
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	,	(check only 21b 27	22 28a	23 28b	24		25 29	26 30
	y Information copied from such Reports and Statem for commercial purposes, other than using the name									
	NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	COU	NT						
	Full Name (Last, First, Middle Initial) David Ceasar					ction ID: Disburse	_	B-174	10	
	Mailing Address 1600 S. Eads St., #524N	]			1 1 M	<sup>/</sup> 2	9 /	Ž (	0 1 0	Y
	City Arlington	State Zip Code VA 22202			Amoun	of Each	Disburs			eriod
	Purpose of Disbursement Travel & Subsistence Expense Reimb						-	80	0.00	
	Candidate Name			ategory/ Type						
	Senate President	ement For: Primary General Other (specify)								
_	State: District: Full Name (Last, First, Middle Initial)				Transa	ction ID:	SB21	B-174	11	
•	David Ceasar  Mailing Address 1600 S. Eads St., #524N	1			Date of	Disburse	ment 9	Y Y	0 1 0	Υ
					-					
	Arlington	State Zip Code VA 22202			Amoun	of Each	Disburs		this Pe	eriod
	Purpose of Disbursement Travel Expense Candidate Name						-		2.75	•
		-		ategory/ Type						
	Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)								
	Full Name (Last, First, Middle Initial) David Ceasar				Date of	ction ID: Disburse	ment			
	Mailing Address 1600 S. Eads St., #524N	I			1 1 M	<sup>/</sup> 2	9 /	ž	0 1 0	Y
	City Arlington	State Zip Code VA 22202			Amoun	of Each	Disburs			eriod
	Purpose of Disbursement Travel & Subsistence Expense Reimb			•				80	0.00	-
	Candidate Name			ategory/ Type						
	Senate President	ement For: Primary General Other (specify)								
	State: District:							164	0.75	•
	UBTOTAL of Disbursements This Page (optional)							161	2.75	•
T	OTAL This Period (last page this line number only)			•	L.					

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ago;; 1100012002			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	NUMBER: PAGE 27 / 260 y one)
TI LIMIZED DISDOTISEMENTS	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) NORA COHEN			Transaction ID: SB21B-1743 Date of Disbursement
Mailing Address 1650 Park Road, NW, Ap	t B		111 D D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code DC 20010		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			27.15
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	,,	
State: District:			
Full Name (Last, First, Middle Initial) NORA COHEN			Transaction ID: SB21B-1744 Date of Disbursement
Mailing Address 1650 Park Road, NW, Ap	t B		111
,	State Zip Code DC 20010		Amount of Each Disbursement this Period
Purpose of Disbursement Airfare			724.50
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) NORA COHEN			Transaction ID: SB21B-1745 Date of Disbursement
Mailing Address 1650 Park Road, NW, Ap	t B		111 D 29 / Y 2010 Y
	State Zip Code DC 20010		Amount of Each Disbursement this Period
Purpose of Disbursement			224.00
Travel & Subsistence Expense Reimb			
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼		
State: District:			
SUBTOTAL of Disbursements This Page (optional) .		<b></b>	975.65

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

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SCHEDULE B (FEC Form 3X)	LEODINE	NUMBER	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	
II EMIZED DISBURSEMEN I S	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Staten or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) JAMES DENBO			Transaction ID: SB21B-1746 Date of Disbursement
Mailing Address 6006 Overlea Road			11 M
City Bethesda	State Zip Code MD 20816		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			53.01
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) JAMES DENBO			Transaction ID: SB21B-1747  Date of Disbursement
Mailing Address 6006 Overlea Road			111 D 29 / Y 2010 Y
City Bethesda	State Zip Code MD 20816		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			800.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) James Doody			Transaction ID: SB21B-1748 Date of Disbursement
Mailing Address 44 Hidden Valley Drive			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
City Newark	State Zip Code DE 19711		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			70.63
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District:			
SURTOTAL of Dichursements This Page (optional)			923.64

9	SCHEDULE B (FEC Form 3X)	Use sepa	rate schedule(s)												29 / 260				
Γ	TEMIZED DISBURSEMENTS	for each o	category of the Summary Page		X	eck onl 21b 27	<u>-</u>	1e) 22 28a		23 28b	F	24 28	. F	25 29		26 30b			
	ny Information copied from such Reports and Statem r for commercial purposes, other than using the name																		
K	NAME OF COMMITTEE (In Full)	and addres	ss or arry political	COIII	111111	ee 10 St	JIICII	COITE	Duti	0115 1	1011	Suci	COIIII	muee					
	DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL	OFFSET ACC	1UC	١T														
Α.	Full Name (Last, First, Middle Initial) James Doody							Trans Date o	of Di	sburs	sem	nent		_					
	Mailing Address 44 Hidden Valley Drive							1 1	M	/ D	2 5	)	ž	0 i c	Y				
		State DE	Zip Code 19711					Amou	nt of	f Eac	h D	isbur		t this F	-	d			
	Purpose of Disbursement Airline Baggage Fees										0	•		60.00	_				
	Candidate Name	mont For			tego Type														
	Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General Cify) ▼																
_	State: District:																		
В.	Full Name (Last, First, Middle Initial) James Doody						1	Trans Date o	of Di	sburs	sem	nent			V				
	Mailing Address 44 Hidden Valley Drive							11	M		2 9	<b>9</b>	ž	0 i c	<b>Y</b>				
	Newark	State DE	Zip Code 19711					Amou	nt of	f Eac	h D	isbur		t this F	-	d			
	Purpose of Disbursement Travel & Subsistence Expense Reimb					600.00													
	Candidate Name	ment For:			tego Type	-													
	Office Sought: House Disburse Senate President State: District:	Primary Other (spe	General cify) ▼																
С.	Full Name (Last, First, Middle Initial) HANNAH EDWARDS							Trans Date o	of Di	sbur	sem	nent	1B-17	751					
	Mailing Address 432 10th Street, NE							1 1	M	/ D	2 5	)	Ý Ž	0 1 C	Y				
		State DC	Zip Code 20002					Amou	nt of	f Eac	h D	isbur		t this F	-	d			
	Purpose of Disbursement Travel Expense													40.44					
	Candidate Name				tego Type														
	Senate President	ment For: Primary Other (spe	General cify) ▼																
Г	State: District:						_												
	SUBTOTAL of Disbursements This Page (optional) .								_				7	00.44					
	TOTAL This Period (last page this line number only)					•													

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SCHEDULE B (FEC Form 3X)		FCD : ":-	NUMBER TO SECURE
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	NUMBER: PAGE 30 / 260 y one)
I I EIVIIZED DISDUKSEIVIEN I S	Detailed Summary Page	X 21b	22 23 24 25 26
Any Information copied from such Reports and Statem	ents may not be sold or used	d by any person f	28a 28b 28c 29 30b
or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	TD 1 / E   0 = E   T   1 0 0	O	
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) HANNAH EDWARDS			Transaction ID: SB21B-1752 Date of Disbursement
Mailing Address 432 10th Street, NE			$\begin{bmatrix}\begin{smallmatrix}M&M&M\\1&1&M\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&D&D\\2&9\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y&Y\\2&0&1&0\end{smallmatrix}\end{bmatrix}$
•	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement Train Travel	20002		23.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) HANNAH EDWARDS			Transaction ID: SB21B-1753 Date of Disbursement
Mailing Address 432 10th Street, NE			$\begin{bmatrix} \begin{smallmatrix} M & M & M \\ 1 & 1 & M \end{smallmatrix} & / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ D & D & I & D \end{smallmatrix} \end{bmatrix}$
•	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			600.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
Kathryn Edwards			Transaction ID: SB21B-1754 Date of Disbursement
Mailing Address 115 W. Monument Ave.,	Apt 1001		$\begin{bmatrix} \begin{smallmatrix} M & M & M \\ 1 & 1 & M \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
	State Zip Code OH 45402		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			31.18
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	• • • • •		
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	654.18

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SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS		OR LINE NUMBER: PAGE 31 / 260 check only one) 21b 22 23 24 25 26
Any Information copied from such Reports and Statem	ents may not be sold or used by an	
or for commercial purposes, other than using the name	and address of any political comm	ittee to solicit contributions from such committee
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCOUNT	T
Full Name (Last, First, Middle Initial) Kathryn Edwards		Transaction ID: SB21B-1755 Date of Disbursement
Mailing Address 115 W. Monument Ave.,	Apt 1001	111 D 29 / Y 2010 Y
•	State Zip Code OH 45402	Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees		25.00
Candidate Name	<b>_</b>	egory/ /pe
Office Sought: House Disburse Senate President State: District:		
State: District:  Full Name (Last, First, Middle Initial)		
Kathryn Edwards		Transaction ID: SB21B-1756 Date of Disbursement
Mailing Address 115 W. Monument Ave.,	Apt 1001	111 D 29 / Y 2010 Y
•	State Zip Code OH 45402	Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		600.00
Candidate Name	<b>_</b>	egory/ ppe
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼	
State: District: Full Name (Last, First, Middle Initial)		
Kathryn Edwards		Transaction ID: SB21B-1757 Date of Disbursement
Mailing Address 115 W. Monument Ave.,	Apt 1001	1 1 1 D 2 9 Y 2 0 1 0 Y
	State Zip Code OH 45402	Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		16.50
Candidate Name	ı	egory/ rpe
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	
State: District:	· · · · · · · · · · · · · · · · · · ·	
SUBTOTAL of Disbursements This Page (optional) .		641.50

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)					INE NUMBER: PAGE 32 / 260 only one)										
ITEMIZED DISBURSEMENTS		for each category of the Detailed Summary Page				$\prod_{i=1}^{n}$	22 28a		23 28b	ш	24 28c		25 29	$\vdash$	26 30b	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name							the pu		e of so	olicitir	ng co		outions	$\Box$		
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL	OFFSET ACC	OUN	N٦	-											
Full Name (Last, First, Middle Initial) Kathryn Edwards							Trans		sburse	emen				Y		
Mailing Address 115 W. Monument Ave.,	Apt 1001						1 1		<sup>D</sup> 2	9	L	2	0 i (	)		
•	State OH	Zip Code 45402					Amou	nt o	f Each	Disb	urse	-			7	
Purpose of Disbursement Travel & Subsistence Expense Reimb				•				-				1	23.42	2	_	
Candidate Name					gory/ pe											
Senate President	ment For: Primary Other (spe	General <b>▼</b>														
State: District: Full Name (Last, First, Middle Initial)							Trans	acti	on ID:	SE	321E	3-17	759			
Kathryn Edwards							Date o	of Di			t / Y	Y	Y	Υ		
Mailing Address 115 W. Monument Ave.,	Apt 1001						1 1		2	29	L	2	0 i 0	)		
,	State OH	Zip Code 45402					Amou	nt o	f Each	Disb	urse	men	t this f	Period	_	
Purpose of Disbursement Airline Baggage Fees			Т		•			-					50.00	)	_	
Candidate Name					egory/ rpe											
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General ecify) ▼														
Full Name (Last, First, Middle Initial) Kathryn Edwards							Trans					3-17	760			
Mailing Address 115 W. Monument Ave.,	Apt 1001						1 1	М	<sup>D</sup> 2	29	Y	ž	0 i 0	) <sup>Y</sup>		
	State OH	Zip Code 45402					Amou	nt o	f Each	Disb	urse	men	t this f	Period	_	
Purpose of Disbursement Travel & Subsistence Expense Reimb							L.					6	00.00	)	_	
Candidate Name					gory/ pe											
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General			<u> </u>											
State: District:	- (= 30	<i>→</i> , <b>▼</b>													_	
SUBTOTAL of Disbursements This Page (optional) .					•							7	73.42	2	1	

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

FOR LINE NUMBER: PAGE 33 / 260 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b 22 23 24 25 26 Detailed Summary Page 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-1761 Kathryn Edwards Date of Disbursement 2 9 1 1 2010 Mailing Address 115 W. Monument Ave., Apt 1001 City State Zip Code Amount of Each Disbursement this Period OH 45402 Dayton 25.00 Purpose of Disbursement Airline Baggage Fees Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-1762 Kathryn Edwards Date of Disbursement 2 9 2010 Mailing Address 115 W. Monument Ave., Apt 1001 City State Zip Code Amount of Each Disbursement this Period 45402 Dayton OH 500.00 Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-1763 Michael Epstein Date of Disbursement 2 9 2010 Mailing Address 134 Oxford Drive City State Zip Code Amount of Each Disbursement this Period Tenafly NJ 07670 800.00 Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District:

SUBTOTAL of Disbursements This Page (optional) ...

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

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	DUNT	
Full Name (Last, First, Middle Initial) Sara Ferrill			Transaction ID: SB21B-1764 Date of Disbursement
Mailing Address 4826 Brookview Drive			111 29 7 2010
•	State Zip Code MO 65109		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			700.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼		
State: District:  Full Name (Last, First, Middle Initial)			
Lawrence Fogel			Transaction ID: SB21B-1765 Date of Disbursement
Mailing Address 501 N. Henry Street, Apt	912		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
	State Zip Code WI 53703		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			8.39
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) Lawrence Fogel			Transaction ID: SB21B-1766 Date of Disbursement
Mailing Address 501 N. Henry Street, Apt	912		$\begin{bmatrix} 1 & 1 & M & M & M & M & M & M & M & M &$
	State Zip Code WI 53703		Amount of Each Disbursement this Period
Purpose of Disbursement			400.00
Travel & Subsistence Expense Reimb Candidate Name		Category/	
Office Sought: House Disburse Senate President	Primary General	Туре	
State: District:	Other (specify)		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	1108.39

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

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 35/260							
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 28a 28b	24 25 26 28c 29 30b							
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		by any person for	or the purpose of sol	iciting contributions							
NAME OF COMMITTEE (In Full)	e and address of any political	Committee to sor	icit contributions froi	II Such committee							
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT									
Full Name (Last, First, Middle Initial) DAVID GIFFORD			Transaction ID: Date of Disburser								
Mailing Address 4082 Happy Valley Road			111 / 29	9 2010							
•	State Zip Code CA 94549		Amount of Each [	Disbursement this Period							
Purpose of Disbursement Travel Expense				9.97							
Candidate Name		Category/ Type									
Senate President	ment For: Primary General Other (specify)										
State: District: Full Name (Last, First, Middle Initial)											
DAVID GIFFORD			Transaction ID:  Date of Disburser	ment							
Mailing Address 4082 Happy Valley Road			111 / 29	9 2010							
•	State Zip Code CA 94549		Amount of Each [	Disbursement this Period							
Purpose of Disbursement Travel & Subsistence Expense Reimb		· ·		500.00							
Candidate Name		Category/ Type									
Senate President	ment For: Primary General Other (specify)										
State: District: Full Name (Last, First, Middle Initial)			T	OD04D 4700							
DAVID GREELISH			Transaction ID: Date of Disburser	ment							
Mailing Address 69 Galen Street, #5			111 / 29	9 2010							
	State Zip Code MA 02472		Amount of Each [	Disbursement this Period							
Purpose of Disbursement Travel Expense			L	110.00							
Candidate Name		Category/ Type									
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)										
State: District:	•										
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>		619.97							

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s) for each category of the Detailed Summary Page				OR LIN			₹:			PA	GE	36 / 2	260	
ITEMIZED DISBURSEMENTS					21b 27	A	22 [ 28a	$\exists$	23 28b	ш	24 28c		25 29	$\boldsymbol{\sqcup}$	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name							the pur			oliciti	ng co			5	
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL	OFFSET ACC	OUN	Ŋ.	Γ										
Full Name (Last, First, Middle Initial) DAVID GREELISH							Transa Date o		sburse	emen			_	V	
Mailing Address 69 Galen Street, #5							11		<sup>D</sup> 2	. 9	/ L	ž	0 1 0	)	
•	State MA	Zip Code 02472					Amour	nt o	f Each	Disb	urse	-		-	i T
Purpose of Disbursement Travel & Subsistence Expense Reimb												7	00.00	)	
Candidate Name					egory/ /pe										
Senate President	ment For: Primary Other (spo	General ecify) ▼													
State: District: Full Name (Last, First, Middle Initial)							Transa	acti	on ID:	SE	321E	3-17	 71		
Itai I. Grunfeld							Date o	_			t / Y	Y	Y	Υ	
Mailing Address 624 N. Virgil Avenue							1 1		2	9	L	2	0 i c	)	
•	State CA	Zip Code 90004					Amour	nt o	f Each	Disb	urse	men	t this F	Period	t
Purpose of Disbursement Travel & Subsistence Expense Reimb												6	00.00	)	
Candidate Name					egory/ /pe										
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General ecify) ▼													
Full Name (Last, First, Middle Initial) Itai I. Grunfeld							Transa Date o			_		3-17	72		
Mailing Address 624 N. Virgil Avenue							1 1 N	1	<sup>D</sup> 2	9	/ Y	ž	0 Ĭ (	) <sup>Y</sup>	
	State CA	Zip Code 90004					Amour	nt o	f Each	Disb	urse	men	t this F	Period	ŀ
Purpose of Disbursement Travel & Subsistence Expense Reimb								_				4	00.00	)	
Candidate Name					egory/ /pe										
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General ecify) ▼													
State: District:		-· <b>•</b>													
SUBTOTAL of Disbursements This Page (optional) .					. •							170	00.00		

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ago;; 1100012002									
SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	E NUMBER: PAGE 37 / 260						
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b						
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name									
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT							
Full Name (Last, First, Middle Initial) Itai I. Grunfeld			Transaction ID: SB21B-1773 Date of Disbursement						
Mailing Address 624 N. Virgil Avenue			111 29 / 2010						
,	State Zip Code CA 90004		Amount of Each Disbursement this Period						
Purpose of Disbursement Travel Expense		· ·	66.25						
Candidate Name		Category/ Type							
Senate President	ment For: Primary General Other (specify)								
State: District:									
Full Name (Last, First, Middle Initial) Itai I. Grunfeld			Transaction ID: SB21B-1774 Date of Disbursement						
Mailing Address 624 N. Virgil Avenue			$ \begin{bmatrix} M & M \\ 1 & 1 \end{bmatrix} \begin{bmatrix} D & D & D \\ 2 & 9 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $						
,	State Zip Code CA 90004		Amount of Each Disbursement this Period						
Purpose of Disbursement Airline Baggage Fees			25.00						
Candidate Name		Category/ Type							
Senate President	ment For: Primary General Other (specify)								
State: District:									
Full Name (Last, First, Middle Initial) Itai I. Grunfeld			Transaction ID: SB21B-1775 Date of Disbursement						
Mailing Address 624 N. Virgil Avenue			111 D 29 / Y 2010 Y						
	State Zip Code CA 90004		Amount of Each Disbursement this Period						
Purpose of Disbursement Travel & Subsistence Expense Reimb		-	700.00						
Candidate Name		Category/ Type							
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)								
State: District:	(-p-ss)/ <b>V</b>								
SUBTOTAL of Disbursements This Page (optional) .		<b>)</b>	791.25						

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

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.90" 1100012000		
SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 260 (check only one)
Any Information copied from such Reports and Statem	ents may not be sold or used by a	
or for commercial purposes, other than using the name	and address of any political com	mittee to solicit contributions from such committee
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCOU	NT
Full Name (Last, First, Middle Initial) HORACIO GUTIERREZ		Transaction ID: SB21B-1776 Date of Disbursement
Mailing Address 407 EAST 12TH STREET	#1RSW	1 1 M 1 M 2 9 / Y 2 0 1 0 Y
•	State Zip Code NY 10009	Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		97.42
Candidate Name		ategory/ Type
Office Sought:  Senate President State:  Disburse	ment For: Primary General Other (specify) ▼	
Full Name (Last, First, Middle Initial)		ID ODG/D /777
HORACIO GUTIERREZ		Transaction ID: SB21B-1777 Date of Disbursement
Mailing Address 407 EAST 12TH STREET	#1RSW	111 D 29 / Y Y Y Y Y Y
•	State Zip Code NY 10009	Amount of Each Disbursement this Period
Purpose of Disbursement	10009	50.00
Airline Baggage Fees		
Candidate Name		ategory/ Type
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼	
State: District:		
Full Name (Last, First, Middle Initial) HORACIO GUTIERREZ		Transaction ID: SB21B-1778  Date of Disbursement
Mailing Address 407 EAST 12TH STREET	#1RSW	111
	State Zip Code NY 10009	Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		500.00
Candidate Name		ategory/ Type
Office Sought: House Disburse Senate President		. 190
State: District:		
SUBTOTAL of Disbursements This Page (optional) .		647.42

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290" 1100012000 1			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) MICHAEL-ANN HADERS			Transaction ID: SB21B-1779 Date of Disbursement
Mailing Address 441 10th Street, NE			111 D 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		•	83.52
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
MICHAEL-ANN HADERS			Transaction ID: SB21B-1780 Date of Disbursement
Mailing Address 441 10th Street, NE			111 D 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			500.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Ryan Jones			Transaction ID: SB21B-1781 Date of Disbursement
Mailing Address 1425 Chapin Street, NW,	Apt 31A		111 D 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			39.40
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	71.5	
State: District:	Caron (opoonly)		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	622.92

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

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		E NUMBER: PAGE 40 / 260						
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 23 24 25 26 28a 28b 28c 29 30b						
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name	for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT							
Full Name (Last, First, Middle Initial) Ryan Jones  Mailing Address 1425 Chapin Street, NW	Apt 31A		Transaction ID: SB21B-1782 Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
•	State Zip Code DC 20009		Amount of Each Disbursement this Period						
Purpose of Disbursement Airline Baggage Fees Candidate Name		Category/ Type	25.00						
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)	,							
Full Name (Last, First, Middle Initial) Ryan Jones  Mailing Address 1425 Chapin Street, NW.	Apt 31A		Transaction ID: SB21B-1783 Date of Disbursement  11 1						
	State Zip Code DC 20009		Amount of Each Disbursement this Period						
Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name	ment For: Primary General Other (specify)	Category/ Type	500.00						
Full Name (Last, First, Middle Initial) Ronald T. Keohane			Transaction ID: SB21B-1784 Date of Disbursement						
Mailing Address 2606 S. Kenmore Court			1 1 M						
Arlington Purpose of Disbursement Events-Site Supplies Candidate Name	State Zip Code VA 22206	Category/ Type	Amount of Each Disbursement this Period 100.66						
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)								
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	625.66						

C.

SCHEDULE B (FEC Form 3X)  Use separate schedule(s)		FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one)  22
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE			
Full Name (Last, First, Middle Initial)			
Ronald T. Keohane			Transaction ID: SB21B-1785 Date of Disbursement
Mailing Address 2606 S. Kenmore Court			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
City Arlington	State Zip Code VA 22206		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			44.00
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)	,	
State: District: Full Name (Last, First, Middle Initial)			
Ronald T. Keohane			Transaction ID: SB21B-1786 Date of Disbursement
Mailing Address 2606 S. Kenmore Court			$ \begin{bmatrix} M & M & M \\ 1 & 1 & M \end{bmatrix} / \begin{bmatrix} D & D & D \\ 2 & 9 & M \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $
City Arlington	State Zip Code VA 22206		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			25.00
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Ronald T. Keohane			Transaction ID: SB21B-1787 Date of Disbursement
Mailing Address 2606 S. Kenmore Court			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Arlington	State Zip Code VA 22206		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			600.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	. 76-2	
State: District:			
SUBTOTAL of Disbursements This Page (optional)			669.00

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the	(check only	7 one) ☐ 22
	Detailed Summary Page	\rightarrow 27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1788
Doug Laundry			Date of Disbursement
Mailing Address 437 New York Ave., NW,	#1204		$\begin{bmatrix} \begin{smallmatrix} M & I & M \\ I & I & M \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & D \\ D & D & I & D \end{bmatrix} $
,	State Zip Code DC 20001		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			100.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate	ment For: Primary General	71	
State: District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1789
Doug Laundry			Date of Disbursement
Mailing Address 437 New York Ave., NW,	#1204		111
•	State Zip Code		Amount of Each Disbursement this Period
	DC 20001		100.00
Purpose of Disbursement Travel & Subsistence Expense Reimb			100.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate	ment For: Primary General		
President State: District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1790
Anna Markowitz			Date of Disbursement
Mailing Address 320 Hicks Street, Apt 4			111 D 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	State Zip Code NY 11201		Amount of Each Disbursement this Period
Purpose of Disbursement Events-Site Supplies			343.20
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate	ment For: Primary General		
President	Other (specify)		
State: District:			
SURTOTAL of Disbursements This Page (ontional)			543.20

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	NUMBER: PAGE 43 / 260
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one)  22
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE			
/ Full Name (Last, First, Middle Initial)			
Anna Markowitz			Transaction ID: SB21B-1791 Date of Disbursement
Mailing Address 320 Hicks Street, Apt 4			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Brooklyn	State Zip Code NY 11201		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			180.31
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
Anna Markowitz			Transaction ID: SB21B-1792 Date of Disbursement
Mailing Address 320 Hicks Street, Apt 4			$ \begin{bmatrix} M & M \\ 1 & 1 \end{bmatrix} \begin{bmatrix} D & D & V \\ 2 & 9 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $
City Brooklyn	State Zip Code NY 11201		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			700.00
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) John McNaught			Transaction ID: SB21B-1793 Date of Disbursement
Mailing Address 2963 Tilden Street, NW			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
City Washington	State Zip Code DC 20008		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			50.00
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President	ement For:  Primary  Other (specify)	- 7 5	
State: District:	·		
SUBTOTAL of Disbursements This Page (optional)			930.31

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam		by any person for	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	DUNT	
Full Name (Last, First, Middle Initial) John McNaught			Transaction ID: SB21B-1794 Date of Disbursement
Mailing Address 2963 Tilden Street, NW			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
City Washington	State Zip Code DC 20008		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name  Office Sought: House Senate President	ement For: Primary General Other (specify)	Category/ Type	700.00
State: District:  Full Name (Last, First, Middle Initial)			Transaction ID: CD01D 1705
Kerry McNellis			Transaction ID: SB21B-1795 Date of Disbursement
Mailing Address 6 Dover Court			$\begin{bmatrix}\begin{smallmatrix}M&1&M\\1&1&\end{smallmatrix}\end{bmatrix} / \begin{bmatrix}\begin{smallmatrix}D&2&D\\2&9\end{smallmatrix}] / \begin{bmatrix}\begin{smallmatrix}Y&&Y&Y&Y\\&2&0&1&0\end{smallmatrix}$
City San Carlos	State Zip Code CA 94070		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			205.00
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			T
Kerry McNellis			Transaction ID: SB21B-1796 Date of Disbursement
Mailing Address 6 Dover Court			$\begin{bmatrix}\begin{smallmatrix}M&1&M\\1&1&\end{smallmatrix}\end{bmatrix} / \begin{bmatrix}\begin{smallmatrix}D&2&D\\2&9\end{smallmatrix}] / \begin{bmatrix}\begin{smallmatrix}Y&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&$
City San Carlos	State Zip Code CA 94070		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		• •	400.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For:  Primary General  Other (specify)	. ,,,,	
State: District:			
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	1305.00

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

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SCHEDULE B (FEC Form 3X)		LEODINE	NUMBER
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	
II EMIZED DISBURSEMENTS	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) Kerry McNellis			Transaction ID: SB21B-1797 Date of Disbursement
Mailing Address 6 Dover Court			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{bmatrix}^M \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{bmatrix}^M \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}^Y \end{bmatrix}$
City San Carlos	State Zip Code CA 94070		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			500.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) BRIAN MCPARTLIN			Transaction ID: SB21B-1798 Date of Disbursement
Mailing Address 1 E. LONNQUIST BLVD			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ D & D & D \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ D & D & D \end{smallmatrix} \end{bmatrix}$
City MOUNT PROSPECT	State Zip Code IL 60056		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			700.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	· 		
Full Name (Last, First, Middle Initial) Michael McSwain			<b>Transaction ID:</b> SB21B-1799 Date of Disbursement
Mailing Address 1427 College Avenue			111 D 29 Y 2010 Y
City Shelby	State Zip Code NC 28152		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			700.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
SURTOTAL of Dishursements This Page (optional)			1900.00

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)				E NUMBER: PAGE 46 / 260 nly one)								
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X	-		22 28a	П	23 28b	$oldsymbol{\sqcup}$	24 28c		25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name													<u> </u>
NAME OF COMMITTEE (In Full)													
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUN	١T	•									
Full Name (Last, First, Middle Initial) Kathryn Minor						Trans Date of		on ID:	_		3-18	800	
Mailing Address 1323 28th Street, NW						1 1	М	<sup>/</sup> 2	2 9	/ Y	ž	0 Ĭ (	) <sup>Y</sup>
,	State Zip Code DC 20007					Amou	nt o	f Each	Disb	urse	men	t this I	Period
Purpose of Disbursement Events-Site Supplies	20007											28.33	3
Candidate Name				gory/ pe									
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)												
Full Name (Last, First, Middle Initial)						Trans	ooti	on ID		2015	0 10	01	
Kathryn Minor						Date o		isburs	emen				V
Mailing Address 1323 28th Street, NW						1 1	IVI	້ _ ້2	9	L	2	0 Ĭ (	)
,	State Zip Code DC 20007					Amou	nt o	f Each	Disb	urse	men	t this I	Period
Purpose of Disbursement Airline Baggage Fees							-			_	_	25.00	)
Candidate Name			ite Ty	gory/ pe									
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)												
Full Name (Last, First, Middle Initial)						_							
Kathryn Minor							of D	isburs	emen				
Mailing Address 1323 28th Street, NW						1 1	М	<sup>/</sup> 2	29	L	ž	0 i (	)
	State Zip Code DC 20007					Amou	nt o	f Each	Disb	urse	-	-	
Purpose of Disbursement Travel & Subsistence Expense Reimb						<u></u>					8	00.00	
Candidate Name				gory/ pe									
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)												
State: District:	· · · · · · · · · · · · · · · · · · ·				$\perp$								
SUBTOTAL of Disbursements This Page (optional) .				<u> </u>							8	53.33	

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SCHEDULE B (FEC Form 3X)		1 50	DINE	NUMBER:	PAGE 47/000
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the		eck only		PAGE 47 / 260
	Detailed Summary Page	X	21b 27	22 23 28b	24 25 26 28c 29 30b
Any Information copied from such Reports and Statem			person fo	or the purpose of solid	citing contributions
or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)  DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT			
Full Name (Last, First, Middle Initial)					
Kathryn Minor				Transaction ID: Date of Disbursem	nent
Mailing Address 1323 28th Street, NW				111 / 29	2010
•	State Zip Code DC 20007			Amount of Each D	hisbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		*			300.00
Candidate Name		Catego	-		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)				
State: District:					
Full Name (Last, First, Middle Initial) Jaime Moore				Transaction ID: Date of Disbursem	nent
Mailing Address 1451 Walz Avenue				111 / 29	2 0 1 0 Y
•	State Zip Code CO 81601			Amount of Each D	isbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			-		800.00
Candidate Name		Catego	-		
Senate President	ment For: Primary General Other (specify)				
State: District: Full Name (Last, First, Middle Initial)					OD04D 4005
Jaime Moore				Transaction ID:  Date of Disbursem	nent
Mailing Address 1451 Walz Avenue				111 / 29	2010
	State Zip Code CO 81601			Amount of Each D	hisbursement this Period
Purpose of Disbursement Travel Expense					58.90
Candidate Name		Catego Type			
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	. , , , ,			
State: District:					
SUBTOTAL of Disbursements This Page (optional) .			•		1158.90

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SCHEDULE B (FEC Form 3X)			NUMBER 12.25
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE I (check only	
II EMIZED DISBURSEMENTS	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) Jaime Moore			Transaction ID: SB21B-1806 Date of Disbursement
Mailing Address 1451 Walz Avenue			111 D 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	State Zip Code CO 81601		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			500.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Philippe Nassif			Transaction ID: SB21B-1807 Date of Disbursement
Mailing Address 355 I Street, SW, Apt 129	5		$ \begin{bmatrix} M & M \\ 1 & 1 \end{bmatrix} \begin{bmatrix} D & D \\ 2 & 9 \end{bmatrix} \begin{bmatrix} Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $
,	State Zip Code DC 20024		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			800.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Krystal Person			Transaction ID: SB21B-1808 Date of Disbursement
Mailing Address 155 Potomac Passage, U	Jnit 222		$ \begin{bmatrix} M & M \\ 1 & 1 \end{bmatrix} \begin{bmatrix} D & D & V \\ 2 & 0 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 \end{bmatrix} $
	State Zip Code MD 20745		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		•	176.00
Candidate Name	_	Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
SURTOTAL of Dishursements This Page (ontinnal)			1476.00

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City State Zip Code National Harbor MD 20745  Purpose of Disbursement Travel & Subsistence Expense Reimb  Candidate Name Category/ Type  Office Sought: House Disbursement For: Senate Primary General	1809 2 0 1 0 Y
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such contributions from suc	1809  York York York York York York York York
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT  Full Name (Last, First, Middle Initial) Krystal Person  Mailing Address 155 Potomac Passage, Unit 222  City State Zip Code National Harbor MD 20745  Purpose of Disbursement Travel & Subsistence Expense Reimb  Candidate Name  Disbursement For: Senate  Disbursement For: Senate  Primary General	1809 2 0 1 0 Y  ent this Period
Krystal Person  Mailing Address 155 Potomac Passage, Unit 222  City State Zip Code National Harbor MD 20745  Purpose of Disbursement Travel & Subsistence Expense Reimb  Candidate Name Category/ Type  Office Sought: House Disbursement For: Senate Primary General	2 0 1 0 vent this Period
Krystal Person  Mailing Address 155 Potomac Passage, Unit 222  City State Zip Code National Harbor MD 20745  Purpose of Disbursement Travel & Subsistence Expense Reimb  Candidate Name Category/ Type  Office Sought: House Disbursement For: Senate Primary General	2 0 1 0 vent this Period
City State Zip Code National Harbor MD 20745  Purpose of Disbursement Travel & Subsistence Expense Reimb  Candidate Name Category/ Type  Office Sought: House Disbursement For: Senate Primary General	ent this Period
National Harbor MD 20745  Purpose of Disbursement Travel & Subsistence Expense Reimb  Candidate Name  Category/ Type  Office Sought: Disbursement For: Senate Primary General	
Purpose of Disbursement Travel & Subsistence Expense Reimb  Candidate Name  Category/ Type  Office Sought: Disbursement For: Senate Primary General	100.00
Candidate Name  Category/ Type  Office Sought: Disbursement For: Senate Primary General	
Senate Primary General	
President Other (specify) ▼ State: District:	
Full Name (Last, First, Middle Initial)  Transaction ID: SB21B-	1010
Emily Petty Date of Disbursement	1010
Mailing Address 811 4th Street, NW, #601	2010
City State Zip Code Amount of Each Disburseme Washington DC 20001	
Purpose of Disbursement Travel Expense	114.86
Candidate Name  Category/ Type	
Office Sought:  Senate  President  Disbursement For:  Primary  General  Other (specify)	
State: District:	
Full Name (Last, First, Middle Initial)  Emily Petty  Transaction ID: SB21B- Date of Disbursement	
Mailing Address 811 4th Street, NW, #601	ž 0 1 0 °
City State Zip Code Amount of Each Disburseme Washington DC 20001	• • • •
Purpose of Disbursement Airline Baggage Fees	20.00
Candidate Name  Category/ Type	
Office Sought:    House	
State: District:	

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SCHEDULE B (FEC Form 3X) FOR			OR LIN	INE NUMBER: PAGE 50 / 260					
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(0	heck o	nly one)					
	Detailed Summary Page	×	21b 27	22 23 28b	24 25 26 28c 29 30b				
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name									
NAME OF COMMITTEE (In Full)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT							
Full Name (Last, First, Middle Initial) Emily Petty				Transaction ID: S					
Mailing Address 811 4th Street, NW, #60	1			111 / 29	2010				
•	State Zip Code DC 20001			Amount of Each Dis	sbursement this Period				
Purpose of Disbursement Travel & Subsistence Expense Reimb	20001		•		600.00				
Candidate Name		Cate							
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	.,	<u> </u>						
State: District:									
Full Name (Last, First, Middle Initial) Evelyn Marie Prentice				Transaction ID: S Date of Disbursement					
Mailing Address 634 Kling Street, Apt A				111 / 29	2010				
•	State Zip Code OH 44311			Amount of Each Dis	sbursement this Period				
Purpose of Disbursement Travel Expense		·	-		65.26				
Candidate Name		Cate							
Senate President	ment For: Primary General Other (specify)								
State: District:									
Full Name (Last, First, Middle Initial) Evelyn Marie Prentice				Transaction ID: S Date of Disbursement	ent				
Mailing Address 634 Kling Street, Apt A				111 29	y žo ťo ť				
	State Zip Code OH 44311			Amount of Each Dis	sbursement this Period				
Purpose of Disbursement Airline Baggage Fees				L	50.00				
Candidate Name		Cate Ty	gory/						
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	т у	<b>P</b> C						
State: District:									
SUBTOTAL of Disbursements This Page (optional)			<b>•</b>		715.26				

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SCHEDULE B (FEC Form 3X)	Han announced to the Co	FOR LINE	NUMBER:	PAGE 51 / 260			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	nly one)				
_ 3	Detailed Summary Page	X 21b 27	22 23 28b 28b	24 25 26 28c 29 30b			
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full)	e and address of any political c	Committee to son	Cit Contributions from s	Sucii Committee			
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCC	DUNT					
Full Name (Last, First, Middle Initial) Evelyn Marie Prentice			Transaction ID: S Date of Disburseme	nt			
Mailing Address 634 Kling Street, Apt A			111 / 29	2010			
•	State Zip Code OH 44311		Amount of Each Dis	bursement this Period			
Purpose of Disbursement Travel & Subsistence Expense Reimb		• •		600.00			
Candidate Name		Category/ Type					
Senate President	ment For: Primary General Other (specify)						
State: District: Full Name (Last, First, Middle Initial)			<b>-</b>	ID01D 1010			
Cole Randle			Transaction ID: S Date of Disburseme				
Mailing Address 8200 Wisconsin Ave., #1	417		11	2010			
City Bethesda	State Zip Code MD 20814		Amount of Each Dis	bursement this Period			
Purpose of Disbursement Travel Expense				136.23			
Candidate Name		Category/ Type					
Senate President	ment For: Primary General Other (specify)						
State: District: Full Name (Last, First, Middle Initial)							
Cole Randle			Transaction ID: S Date of Disburseme	nt			
Mailing Address 8200 Wisconsin Ave., #1	417		111 / 29	2010			
	State Zip Code MD 20814		Amount of Each Dis	bursement this Period			
Purpose of Disbursement Travel & Subsistence Expense Reimb				800.00			
Candidate Name		Category/ Type					
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	1 1 1 1					
State: District:							
SUBTOTAL of Disbursements This Page (optional)				1536.23			

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		E NUMBER: PAGE 52 / 260					
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	7 one)					
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		d by any person fo	or the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT						
Full Name (Last, First, Middle Initial) DANIEL RASKOV			Transaction ID: SB21B-1818 Date of Disbursement					
Mailing Address 316 San Vicente Blvd.			111 D 29 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	State Zip Code		Amount of Each Disbursement this Period					
Santa Monica Purpose of Disbursement	CA 90402		84.71					
Travel Expense Candidate Name		Category/						
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	Туре						
State: District:								
Full Name (Last, First, Middle Initial) DANIEL RASKOV			Transaction ID: SB21B-1819 Date of Disbursement					
Mailing Address 316 San Vicente Blvd.			$ \begin{bmatrix} M & M & M \\ 1 & 1 & M \end{bmatrix} / \begin{bmatrix} D & 2 & 0 \\ 2 & 9 & M \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $					
City Santa Monica	State Zip Code CA 90402		Amount of Each Disbursement this Period					
Purpose of Disbursement Travel & Subsistence Expense Reimb		•	500.00					
Candidate Name		Category/ Type						
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)							
State: District:	· ·							
Full Name (Last, First, Middle Initial) JESSE J ROSEN			Transaction ID: SB21B-1820 Date of Disbursement					
Mailing Address 1045 W. County Line Ro	ad		111 D 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City Bayside	State Zip Code WI 53217		Amount of Each Disbursement this Period					
Purpose of Disbursement Travel Expense			146.00					
Candidate Name		Category/ Type						
Senate President	ment For: Primary General Other (specify)							
State: District:								
SURTOTAL of Dishursements This Page (ontional)			730.71					

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COLLEDING D (FEO Farms OV)							
SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	NUMBER: PAGE 53 / 260				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b				
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full)	, , p						
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	DUNT					
Full Name (Last, First, Middle Initial) JESSE J ROSEN			Transaction ID: SB21B-1821 Date of Disbursement				
Mailing Address 1045 W. County Line Roa	ad		$\begin{bmatrix}\begin{smallmatrix}M&1&M\\1&1&M\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&D&D\\2&9\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Q&Y\\2&0&1&0\end{smallmatrix}\end{bmatrix}$				
•	State Zip Code WI 53217		Amount of Each Disbursement this Period				
Purpose of Disbursement Travel & Subsistence Expense Reimb			500.00				
Candidate Name		Category/ Type					
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)	71					
Full Name (Last, First, Middle Initial)							
PETER A SELFRIDGE			Transaction ID: SB21B-1822 Date of Disbursement				
Mailing Address 1414 Belmont St., NW, A	pt 301		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $				
	State Zip Code DC 20009		Amount of Each Disbursement this Period				
Purpose of Disbursement			102.00				
Travel & Subsistence Expense Reimb  Candidate Name		Category/ Type					
Senate President	ment For: Primary General Other (specify)	71					
State: District:							
Full Name (Last, First, Middle Initial) PETER A SELFRIDGE			Transaction ID: SB21B-1823 Date of Disbursement				
Mailing Address 1414 Belmont St., NW, A	pt 301		1 1 M				
	State Zip Code DC 20009		Amount of Each Disbursement this Period				
Purpose of Disbursement Car Rental			127.44				
Candidate Name		Category/ Type					
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)						
State: District:	,						
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	729.44				

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	
Any Information copied from such Reports and Statem		by any person f	28a 28b 28c 29 30b
or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) BEN SHANNON			Transaction ID: SB21B-1824 Date of Disbursement
Mailing Address 5609 Silo Hill Court			111 D 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code MD 20855		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			67.94
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:  Full Name (Last, First, Middle Initial)			
BEN SHANNON			Transaction ID: SB21B-1825 Date of Disbursement
Mailing Address 5609 Silo Hill Court			$\begin{bmatrix}\begin{smallmatrix}M&M&M\\1&1&M\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&D\\2&9\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y&Y\\2&0&1&0\end{smallmatrix}\end{bmatrix}$
City	State Zip Code		Amount of Each Disbursement this Period
	MD 20855		25.00
Purpose of Disbursement Airline Baggage Fees			20.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) BEN SHANNON			Transaction ID: SB21B-1826 Date of Disbursement
Mailing Address 5609 Silo Hill Court			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
	State Zip Code MD 20855		Amount of Each Disbursement this Period
Purpose of Disbursement		· ·	600.00
Travel & Subsistence Expense Reimb Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	i ype	
State: District:	Caron (Specify)		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	692.94

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

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	
TI LIMIZED DISDOTISEMENTS	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	DUNT	
Full Name (Last, First, Middle Initial) Elisa Shyu			Transaction ID: SB21B-1827 Date of Disbursement
Mailing Address 101 North Carolina Ave.,	SE, #108		111 29 / 2010
,	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		•	70.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Elisa Shyu			Transaction ID: SB21B-1828 Date of Disbursement
Mailing Address 101 North Carolina Ave.,	SE, #108		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
,	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		· ·	500.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) JANNA SIDLEY			Transaction ID: SB21B-1829 Date of Disbursement
Mailing Address 10358 LORENZO DRIVE			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
	State Zip Code CA 90064		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		• •	94.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	(-p-56)/ <b>\</b>		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	664.00

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

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SCHEDULE B (FEC Form 3X)		arate schedule(s)		FOR LINE NUMBER: [For check only one)		PA	GE	56 /	260						
ITEMIZED DISBURSEMENTS	for each category of the		21b 27	H	22 28a		23 28b	$\mathbf{\square}$	.4 .8c		25 29	2 3	6 0b		
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name														6	
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL	OFFSET ACC	OUI	N	Т										
Full Name (Last, First, Middle Initial) JANNA SIDLEY									isburs	_			330 0 1 (	Y	
Mailing Address 10358 LORENZO DRIVE		7. 0.						_			L				_
,	State CA	Zip Code 90064					Amou	nt o	f Each	ı Disbı	ırse	-			1
Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name					tegory/				•			5	00.00	)	]
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General ecify) ▼		T	уре										
Full Name (Last, First, Middle Initial) Bradford A. Simmons									isburs	ement				V	
Mailing Address 6310 Mossway							1"1			29	L	2	010	) <sup>'</sup>	
,	State MD	Zip Code 21212					Amou	nt o	f Each	Disbu	ırse	men	t this I	Period	_
Purpose of Disbursement Travel Expense			Г	_			L.						90.02	2	
Candidate Name					egory/ ype										
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General <b>▼</b>													
State: District:  Full Name (Last, First, Middle Initial)  Bradford A. Simmons							Trans		ion ID:			3-18	32		_
Mailing Address 6310 Mossway								M		2 9	Y	ž	0 1 (	) Y	
,	State MD	Zip Code 21212					Amou	nt o	f Each	Disbu	ırse	-			_ 1
Purpose of Disbursement Travel & Subsistence Expense Reimb				_					-			.7	00.00	)	
Candidate Name					egory/ ype										
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General <b>▼</b>													
State: District:		-· •													_
SUBTOTAL of Disbursements This Page (optional) .					▶							129	90.02	2	

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	E NUMBER: PAGE 57 / 260					
EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b		24				
	Betailed Gammary 1 age	27	28a 28b 2	28c 29 30b				
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam								
NAME OF COMMITTEE (In Full)								
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT						
Full Name (Last, First, Middle Initial)			Transaction ID: SE	321B-1833				
Bradford A. Simmons			Date of Disbursement	t				
Mailing Address 6310 Mossway			111 / 29	<sup>Y</sup> 2010 <sup>Y</sup>				
City Baltimore	State Zip Code MD 21212		Amount of Each Disb	ursement this Period				
Purpose of Disbursement	21212	-		183.48				
Travel Expense								
Candidate Name		Category/ Type						
Office Sought: House Disburse	ement For:							
Senate President	Primary General Other (specify) ▼							
State: District:	Other (specify)							
Full Name (Last, First, Middle Initial)			Transaction ID: SE	321B-1834				
Bradford A. Simmons			Date of Disbursement					
Mailing Address 6310 Mossway			111 / 29	Ž O Ĭ O Š				
City	State Zip Code		Amount of Each Disb	urcoment this Period				
Baltimore	MD 21212		Amount of Lacif Disbl					
Purpose of Disbursement		•		500.00				
Travel & Subsistence Expense Reimb  Candidate Name		Category/						
		Type						
· — —	ement For:							
Senate President	Primary General Other (specify) ▼							
State: District:	, (1 )/ •							
Full Name (Last, First, Middle Initial)			Transaction ID: SE					
Kate Sinner			Date of Disbursement					
Mailing Address 1926 W Burnside St., Ur	it 1410		111 29	2010°				
City Portland	State Zip Code OR 97209		Amount of Each Disb	ursement this Period				
Purpose of Disbursement	On 9/209			40.00				
Travel Expense								
Candidate Name		Category/ Type						
Office Sought: House Disburse	ement For:	- 75-0						
Senate	Primary General							
State: District:	Other (specify)							
-				700.40				
<b>SUBTOTAL</b> of Disbursements This Page (optional)				723.48				

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

FOR LINE NUMBER: PAGE 58 / 260 Use separate schedule(s) (check only one) for each category of the 21b 22 23 24 25 26 Detailed Summary Page 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-1836 Kate Sinner Date of Disbursement 2 9 1 1 2010 Mailing Address 1926 W Burnside St., Unit 1410 City Zip Code State Amount of Each Disbursement this Period Portland OR 97209 500.00 Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-1837 TIMOTHY SNEED Date of Disbursement 2 9 2010 Mailing Address 101 S. WHITING STREET, #808 City State Zip Code Amount of Each Disbursement this Period **ALEXANDRIA** 22304 V۸ 78.00 Purpose of Disbursement Travel Expense Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-1838 TIMOTHY SNEED Date of Disbursement 2 9 2010 Mailing Address 101 S. WHITING STREET, #808 City State Zip Code Amount of Each Disbursement this Period **ALEXANDRIA** VA 22304 800.00 Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: 1378.00

SUBTOTAL of Disbursements This Page (optional) ...

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

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	E NUMBER: PAGE 59 / 260					
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b					
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		by any person f	or the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT						
Full Name (Last, First, Middle Initial) Benjamin Solomon			Transaction ID: SB21B-1839 Date of Disbursement					
Mailing Address 14 Black Birch Road			$\begin{bmatrix} M & M & M \\ 1 & 1 & M \end{bmatrix} / \begin{bmatrix} D & D \\ 2 & 9 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$					
,	State Zip Code NJ 07076		Amount of Each Disbursement this Period					
Purpose of Disbursement Travel Expense		v v	173.53					
Candidate Name		Category/ Type						
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)							
Full Name (Last, First, Middle Initial) Benjamin Solomon			Transaction ID: SB21B-1840 Date of Disbursement					
Mailing Address 14 Black Birch Road			1 1 M					
,	State Zip Code NJ 07076		Amount of Each Disbursement this Period					
Purpose of Disbursement Travel & Subsistence Expense Reimb			800.00					
Candidate Name		Category/ Type						
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)							
State: District:								
Full Name (Last, First, Middle Initial) Ali Sutton			Transaction ID: SB21B-1841 Date of Disbursement					
Mailing Address 1422 11th Street, NW, Ap	ot 2		111 D 29 / Y 2010 Y					
	State Zip Code DC 20001		Amount of Each Disbursement this Period					
Purpose of Disbursement Travel Expense			50.00					
Candidate Name		Category/ Type						
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)							
State: District:								
SUBTOTAL of Disbursements This Page (optional) .		<b></b>	1023.53					

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

C.

SCHEDULE B (FEC Form 3X)		FORLINE	NUMBED.	DACE 00 / 000			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	E NUMBER: PAGE 60 / 260 lly one)				
II EMIZED DISBURSEMENTS	Detailed Summary Page	X 21b 27	22 23 28b 28b	24 25 26 28c 29 30			
Any Information copied from such Reports and Statem or for commercial purposes, other than using the nam							
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT					
Full Name (Last, First, Middle Initial) Ali Sutton			Transaction ID: S Date of Disbursement	-			
Mailing Address 1422 11th Street, NW, A	pt 2		111 / 29	<sup>y</sup> <sup>y</sup> 2010 <sup>y</sup>			
City Washington	State Zip Code DC 20001		Amount of Each Disl	bursement this Period			
Purpose of Disbursement Travel & Subsistence Expense Reimb				800.00			
Candidate Name		Category/ Type					
Senate President	ement For: Primary General Other (specify)						
State: District:							
Full Name (Last, First, Middle Initial) Stephanie Temaat			Transaction ID: S Date of Disbursemen	nt			
Mailing Address 400 Sophy Street			111 29	2010			
City Spearville	State Zip Code KS 67876		Amount of Each Disl	bursement this Period			
Purpose of Disbursement Events-Site Supplies				54.98			
Candidate Name		Category/ Type					
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)						
State: District:							
Full Name (Last, First, Middle Initial) Stephanie Temaat			Transaction ID: S Date of Disbursemen				
Mailing Address 400 Sophy Street			111 / 29	2010			
City Spearville	State Zip Code KS 67876		Amount of Each Disl	bursement this Period			
Purpose of Disbursement Travel Expense				48.00			
Candidate Name		Category/ Type					
Office Sought: House Disburse Senate President	ement For:    Primary   General     Other (specify)   \blacktriangleright						
State: District:	- ·						
SURTOTAL of Dishursements This Page (optional)				902.98			

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SCHEDULE B (FEC Form 3X)	Llas apparata aphadula(a)	FOR LINE	NUMBER: PAGE 61 / 260
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)	- · · · · · · · · · · · · · · · · · · ·		
DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1845
Stephanie Temaat			Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 400 Sophy Street			11 29 2010
City Spearville	State Zip Code KS 67876		Amount of Each Disbursement this Period
Purpose of Disbursement	110 07070	-	25.00
Airline Baggage Fees Candidate Name		Catanany	
Candidate Name		Category/ Type	
	ement For:		
Senate President	Primary General Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) Stephanie Temaat			Transaction ID: SB21B-1846 Date of Disbursement
· · · · · · · · · · · · · · · · · · ·			M M / D D / Y Y Y Y
Mailing Address 400 Sophy Street			11 29 2010
City Spearville	State Zip Code KS 67876		Amount of Each Disbursement this Period
Purpose of Disbursement	7070		800.00
Travel & Subsistence Expense Reimb			
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate	ement For: Primary General		
President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Rachel Thomas			Transaction ID: SB21B-1847 Date of Disbursement
Mailing Address 303 South 40th Street			111 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Philadelphia	State Zip Code PA 19104		Amount of Each Disbursement this Period
Purpose of Disbursement			700.00
Travel & Subsistence Expense Reimb  Candidate Name		Category/	
		Type	
Office Sought: House Disburs Senate	ement For:  Primary General		
President	Other (specify)		
State: District:			
SUBTOTAL of Disbursements This Page (optional)			1525.00

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age# 11990128917			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	NUMBER: PAGE 62 / 260 / one) 22 23 24 25 26
Any Information copied from such Reports and Staten	onte may not be cold or used	by any parson f	28a 28b 28c 29 30b
or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1848
Samuel Thomas			Date of Disbursement
Mailing Address 75 Cricket Ave., Apt 75B			111 D 29 / Y 2010 Y
City Ardmore	State Zip Code PA 19003		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		· ·	80.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)	7,1	
State: District:  Full Name (Last, First, Middle Initial)			
Samuel Thomas			Transaction ID: SB21B-1849 Date of Disbursement
Mailing Address 75 Cricket Ave., Apt 75B			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} \end{bmatrix}$
City	State Zip Code		Amount of Each Disbursement this Period
Ardmore Purpose of Disbursement	PA 19003		500.00
Travel & Subsistence Expense Reimb			
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
Samuel Thomas			Transaction ID: SB21B-1850 Date of Disbursement
Mailing Address 75 Cricket Ave., Apt 75B			1 1 M
City Ardmore	State Zip Code PA 19003		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		•	25.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	·		
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	605.00

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SCHEDULE B (FEC Form 3X)		LEODINE	NUMBER DAGE 00 / 000
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	
ITEMIZED DISBURSEMENTS	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) Samuel Thomas			Transaction ID: SB21B-1851 Date of Disbursement
Mailing Address 75 Cricket Ave., Apt 75B			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} D & D \\ 2 & 9 \end{bmatrix} \ \ \ \ \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $
City Ardmore	State Zip Code PA 19003		Amount of Each Disbursement this Period
Purpose of Disbursement	FA 19003	-	600.00
Travel & Subsistence Expense Reimb Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)	,	
State: District:			
Full Name (Last, First, Middle Initial) Samuel Thomas			Transaction ID: SB21B-1852 Date of Disbursement
Mailing Address 75 Cricket Ave., Apt 75B			$ \begin{bmatrix} M & M \\ 1 & 1 \end{bmatrix} \begin{bmatrix} D & D \\ 2 & 9 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $
City Ardmore	State Zip Code PA 19003		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		* *	300.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Alexander A. Thorpe			Transaction ID: SB21B-1853 Date of Disbursement
Mailing Address 1415 Chapin Street, NW	#207		111
City Washington	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			69.95
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
SURTOTAL of Dishursements This Page (ontional)			969.95

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE N	
TEMIZED DISBURSEMENTS	for each category of the	(check only o	
	Detailed Summary Page	X 21b 27	22
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		y any person for	
NAME OF COMMITTEE (In Full)			
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCOU	JNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1854
Alexander A. Thorpe			Date of Disbursement
Mailing Address 1415 Chapin Street, NW	, #207		111
	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		• •	400.00
Candidate Name		Category/	
		Туре	
Office Sought: House Disburse Senate	ment For:    Primary   General		
President	Other (specify)		
State: District:	•		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1855
Peter Vale			Date of Disbursement
Mailing Address 425 Glyn Wynne Road			$ \begin{bmatrix} 1 & 1 & 1 & 1 \\ 1 & 1 & 1 & 1 \end{bmatrix} \begin{bmatrix} 1 & 2 & 9 & 1 \\ 2 & 9 & 1 \end{bmatrix} \begin{bmatrix} 1 & 2 & 1 & 1 \\ 2 & 0 & 1 & 0 \end{bmatrix} $
•	State Zip Code		Amount of Each Disbursement this Period
	PA 19041		800.00
Purpose of Disbursement Travel & Subsistence Expense Reimb			000.00
Candidate Name		Category/ Type	
· -	ment For:		
Senate President	Primary General Other (specify) ▼		
State: District:	Outer (Specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1856
Maju Varghese			Date of Disbursement
Mailing Address 70-60 260th Street			$\begin{bmatrix} \begin{smallmatrix} M & 1 & M \\ 1 & 1 & M \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 2 & 0 \\ & 2 & 9 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ & 2 & 0 & 1 & 0 \end{bmatrix}$
	State Zip Code NY 11004		Amount of Each Disbursement this Period
Purpose of Disbursement	11004	•	700.00
Travel & Subsistence Expense Reimb  Candidate Name	L	Category/	
		Type	
, H	ment For:		
Senate President	Primary General Other (specify) ▼		
State: District:	Caron (opening)		
SURTOTAL of Dishursements This Page (ontional)			1900.00

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the	(check only	one) ☐ 22
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1857
Maju Varghese			Date of Disbursement
Mailing Address 70-60 260th Street			$\begin{bmatrix} \begin{smallmatrix} M & I & M \\ 1 & 1 & M \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
City Glen Oaks	State Zip Code NY 11004		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		· ·	336.90
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Susan Watson			Transaction ID: SB21B-1858 Date of Disbursement
Mailing Address 16362 North Hawthorne	Lane		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
City Mount Vernon	State Zip Code IL 62864		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			25.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Susan Watson			<b>Transaction ID:</b> SB21B-1859 Date of Disbursement
Mailing Address 16362 North Hawthorne	Lane		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Mount Vernon	State Zip Code IL 62864		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			700.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
SURTOTAL of Dishursements This Page (ontional)			1061.90

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SCHEDULE B (FEC Form 3X)		arate schedule(s)			OR LIN			R:		Р	AGE	66 /	260
ITEMIZED DISBURSEMENTS		category of the Summary Page		Ė	21b 27	П	22 28a	П	23 28b	24 280	F	25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name													3
NAME OF COMMITTEE (In Full)													
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL	OFFSET ACC	OUN	N-	Γ								
Full Name (Last, First, Middle Initial)							Trans	acti	on ID:	SB21	B-1	860	
Susan Watson								_	isburse		V .	,	V
Mailing Address 16362 North Hawthorne	Lane						1"1	IVI	້ 2	9 /	` 2	2 0 1 (	)
,	State IL	Zip Code 62864					Amou	nt o	f Each	Disburs	emer	nt this I	Period
Purpose of Disbursement Travel Expense			Т	0	-			_			1	30.76	5
Candidate Name			Ca	ate	egory/								
					ype								
Senate President	ment For: Primary Other (spe	General <b>▼</b>											
State: District: Full Name (Last, First, Middle Initial)													
Susan Watson							Date	of D	isburs				
Mailing Address 16362 North Hawthorne	Lane						1 1	М	<sup>′</sup> 2	9 /	2	2 0 1 (	) <sup>Y</sup>
,	State IL	Zip Code 62864					Amou	nt o	f Each	Disburs	emer	nt this	Period
Purpose of Disbursement Airline Baggage Fees							L.					25.00	)
Candidate Name					egory/ ype								
Senate President	ment For: Primary Other (spe	General			-								
State: District:													
Full Name (Last, First, Middle Initial) Susan Watson							Date of	of D	isburs				
Mailing Address 16362 North Hawthorne	Lane						1 1	М	<sup>/</sup> 2	9 /	Y 2	2 0 1 (	) <sup>Y</sup>
	State IL	Zip Code 62864					Amou	nt o	f Each	Disburs	emer	nt this	Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			Г		•		L.					300.00	)
Candidate Name					egory/ ype								
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General ecify) ▼			••								
State: District:	· · ·	· 											
SUBTOTAL of Disbursements This Page (optional)					. ▶						9	55.76	<b>i</b>

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OUEDINE D. (FEO Farms OV)				
SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	NUMBER:	PAGE 67 / 260
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 28a 28b	24 25 26 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)	, , <sub>/</sub> ,			
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT		
Full Name (Last, First, Middle Initial) WHITE HOUSE AIRLIFT OPERATIONS			<b>Transaction ID:</b> S Date of Disbursemen	
Mailing Address 1600 Pennsylvania Aven EEOB Room #25	ue, NW		111 / 29	ŽOŽOŠ
	State Zip Code DC 20502		Amount of Each Dist	oursement this Period
Purpose of Disbursement White House Airlift In-flight Services				113.98
Candidate Name		Category/ Type		
Senate President	ment For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) WHITE HOUSE AIRLIFT OPERATIONS			Transaction ID: S Date of Disbursemer	nt
Mailing Address 1600 Pennsylvania Aven EEOB Room #25	ue, NW		111 / 29	ŽOŽOŠ
•	State Zip Code DC 20502		Amount of Each Disk	oursement this Period
Purpose of Disbursement White House Airlift Airfare				22037.55
Candidate Name		Category/ Type		
Senate President	ment For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) WHITE HOUSE AIRLIFT OPERATIONS			Transaction ID: S Date of Disbursemer	nt
Mailing Address 1600 Pennsylvania Aven EEOB Room #25	ue, NW		111 / 29	Ž O Ĭ O Š
	State Zip Code DC 20502		Amount of Each Disk	oursement this Period
Purpose of Disbursement White House Airlift Helo		· · ·		2755.12
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	71		
State: District:	· · · · · · · · · · · · · · · · · · ·			
SUBTOTAL of Disbursements This Page (optional) .				24906.65

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ago,, 11000120020			
SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	NUMBER: PAGE 68 / 260
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b	7 cne)   22
		27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	TNUC	
Full Name (Last, First, Middle Initial) PAUL STOVALL			Transaction ID: SB21B-1866 Date of Disbursement
Mailing Address 257A Brooklyn Avenue			111 29 7 2010
,	State Zip Code NY 11213		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			25.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			T ID OD04D 4007
PAUL STOVALL			Transaction ID: SB21B-1867 Date of Disbursement
Mailing Address 257A Brooklyn Avenue			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ ^{\prime} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{smallmatrix} \end{bmatrix} \ ^{\prime} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
	State Zip Code		Amount of Each Disbursement this Period
Brooklyn Purpose of Disbursement	NY 11213		800.00
Travel & Subsistence Expense Reimb			
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
Sally Armbruster			Transaction ID: SB21B-1869 Date of Disbursement
Mailing Address 2208 N. Sedgwick, Apt 2			1 1 M
	State Zip Code IL 60614		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		-	800.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	. 75-2	
State: District:	Caror (Specify)		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	1625.00

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

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	7 one)
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		d by any person f	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1870
ANDREW BINNS			Date of Disbursement
Mailing Address 75 Peterborough Street,	#407		111 2010
,	State Zip Code MA 02215		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			140.81
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	1,100	
State: District:			
Full Name (Last, First, Middle Initial) ANDREW BINNS			Transaction ID: SB21B-1871 Date of Disbursement
Mailing Address 75 Peterborough Street,	#407		1 1 M 1 M / D 3 D / Y 2 0 1 0 Y
City Boston	State Zip Code MA 02215		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		* *	800.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	· · · · · · · · · · · · · · · · · · ·		
Full Name (Last, First, Middle Initial) JESSICA BLAKEMORE			<b>Transaction ID:</b> SB21B-1872 Date of Disbursement
Mailing Address 1701 16th Street, NW, A	ot 621		$\begin{bmatrix} M & M \\ 1 & 1 \end{bmatrix} & \begin{bmatrix} D & D \\ 3 & 0 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			79.52
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
SURTOTAL of Disbursaments This Page (ontional)			1020.33

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SCHEDULE B (FEC Form 3X)		FORLINE	NUMBER. DAGE 70 / 000
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	
II LMIZED DISBORSEMENTS	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) JESSICA BLAKEMORE			Transaction ID: SB21B-1873 Date of Disbursement
Mailing Address 1701 16th Street, NW, A	ot 621		$\begin{bmatrix}\begin{smallmatrix}M\\1\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}M\\M\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}D\\3\end{smallmatrix}} \begin{bmatrix}0\\3\end{smallmatrix} \begin{bmatrix}0\\0\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}Y\\2\end{smallmatrix}} \begin{bmatrix}Y\\3\end{smallmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \begin{bmatrix}Y\\3\end{smallmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \end{bmatrix} \begin{bmatrix}Y\\2\end{smallmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \end{bmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \end{bmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \end{bmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \end{bmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \end{bmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \end{bmatrix} \begin{bmatrix}Y\\Y\\Y\\1\end{smallmatrix} \end{bmatrix} \begin{bmatrix}Y\\Y\\Y\\Y\\Y\\Y\\Y\\Y\\$
City Washington	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			280.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) Anie Borja			Transaction ID: SB21B-1874 Date of Disbursement
Mailing Address 530 Grand Street, Apt E3	3A		$\begin{bmatrix} \begin{smallmatrix} M & M & M \\ 1^M & 1^M & M \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 3 & 0 \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2^M & 1^M & 0 \end{bmatrix} $
City New York	State Zip Code NY 10002		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			87.43
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	· 		
Full Name (Last, First, Middle Initial) Anie Borja			<b>Transaction ID:</b> SB21B-1875 Date of Disbursement
Mailing Address 530 Grand Street, Apt E3	BA		111
City New York	State Zip Code NY 10002		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			700.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
SURTOTAL of Dishursements This Page (ontional)			1067.43

	CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS		Use separate schedule(s)					NE NUMBER: PAGE 71 / 260							
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١		NATIONAL CON	MITTEE -	TRAVEL	OFFSET ACC	OUI	NT								
		First, Middle Initial)											321B-1	876	
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Mailino	g Address	164 Washingto	on Street						1 1	IVI	′ [ 3	3 O		žoťo	) <sup>'</sup>
City Spart	tanburg			State SC	Zip Code 29301				Amou	unt c	of Each	Dist	ourseme	nt this F	Perio
Purpos	se of Disbu	rsement				Г		_		_				57.50	)
	l Expense date Name						atego	-							
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250	g	Senate		Primary	General										
State:		President District:		Other (spe	есіту) 🔻										
	•	First, Middle Initial)	-									_	321B-1	877	
Tram	aine Brov	vn									isburs			V '''	V
Mailin	g Address	164 Washingto	on Street						1 1 1	М	/ D 3	3 O	/ L	ž o i c	) <sup>*</sup>
City	tanburg			State SC	Zip Code 29301				Amou	unt c	of Each	Disb	ourseme	nt this F	Perio
	se of Disbu	rsement			29301	_		_						50.00	)
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		President		Other (spe											
State:		District:													
	ame (Last, laine Brov	First, Middle Initial) vn							Date	of D	isburs	emen			
Mailinç	g Address	164 Washingto	on Street						1 1	М	/ D 3	3 O	/ Y	ž o i c	) <sup>Y</sup>
City Spart	tanburg			State SC	Zip Code 29301				Amou	unt c	of Each	Dist	ourseme	nt this F	Perio
Purpos	se of Disbu	rsement ence Expense Reimb				Г			† L					800.00	)
	date Name	ence Expense neimo					atego								
Office	Sought:	House	Disburse	ement For:			Туре		-						
		Senate President		Primary Other (spe	General ecify)										
State:		District:			•••										
										-	-			07.50	

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

FOR LINE NUMBER: PAGE 72 / 260 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b 22 23 24 25 26 Detailed Summary Page 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-1879 MICHAEL BRUSH Date of Disbursement 3 Ŏ 1 1 2010 Mailing Address 1755 T Street, NW City State Zip Code Amount of Each Disbursement this Period Washington DC 20009 33.28 Purpose of Disbursement Travel Expense Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-1880 MICHAEL BRUSH Date of Disbursement зŏ 2010 Mailing Address 1755 T Street, NW City State Zip Code Amount of Each Disbursement this Period Washington 20009 DC 147.59 Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-1881 MICHAEL CAREY Date of Disbursement 30 2010 Mailing Address 212 W. 16th Street, Apt 2R City State Zip Code Amount of Each Disbursement this Period New York NY 10011 60.08 Purpose of Disbursement Travel Expense Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District:

SUBTOTAL of Disbursements This Page (optional) ...

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

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	NE NUMBER: PAGE 73 / 260 only one)						
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b						
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name									
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT							
Full Name (Last, First, Middle Initial) Todd H. Dennett			Transaction ID: SB21B-1882 Date of Disbursement						
Mailing Address 1752 NW Market, #407			$\begin{bmatrix} M & M & M \\ 1 & 1 & M \end{bmatrix} / \begin{bmatrix} D & 3 & 0 \\ 3 & 0 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$						
,	State Zip Code WA 98107		Amount of Each Disbursement this Period						
Purpose of Disbursement Travel Expense			92.28						
Candidate Name		Category/ Type							
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	71							
State: District:									
Full Name (Last, First, Middle Initial) Todd H. Dennett			Transaction ID: SB21B-1883 Date of Disbursement						
Mailing Address 1752 NW Market, #407			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 3 & 0 \\ 3 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$						
,	State Zip Code WA 98107		Amount of Each Disbursement this Period						
Purpose of Disbursement Travel & Subsistence Expense Reimb			800.00						
Candidate Name		Category/ Type							
Senate President	ment For: Primary General Other (specify)								
State: District:									
Full Name (Last, First, Middle Initial) Phyllis Dickerson			Transaction ID: SB21B-1884 Date of Disbursement						
Mailing Address 2219 Singleton Cove			$\begin{bmatrix} M & M & M \\ 1 & 1 & M \end{bmatrix} / \begin{bmatrix} D & 3 & 0 \\ 3 & 0 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$						
	State Zip Code AR 72204		Amount of Each Disbursement this Period						
Purpose of Disbursement Events-Site Supplies			12.60						
Candidate Name		Category/ Type							
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)								
State: District:	(open_j) \								
SUBTOTAL of Disbursements This Page (optional) .		<b></b>	904.88						

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

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	NE NUMBER: PAGE 74 / 260 only one)						
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b						
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name									
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT							
Full Name (Last, First, Middle Initial) Phyllis Dickerson			Transaction ID: SB21B-1885 Date of Disbursement						
Mailing Address 2219 Singleton Cove			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 3 & 0 \\ 3 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$						
,	State Zip Code AR 72204		Amount of Each Disbursement this Period						
Purpose of Disbursement Travel Expense			27.00						
Candidate Name		Category/ Type							
Senate President	ment For: Primary General Other (specify)	71							
State: District:									
Full Name (Last, First, Middle Initial) Phyllis Dickerson			Transaction ID: SB21B-1886 Date of Disbursement						
Mailing Address 2219 Singleton Cove			$\begin{bmatrix} M & M & M \\ 1 & 1 & M \end{bmatrix} / \begin{bmatrix} D & 3 & 0 \\ 3 & 0 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$						
,	State Zip Code AR 72204		Amount of Each Disbursement this Period						
Purpose of Disbursement Airline Baggage Fees			50.00						
Candidate Name		Category/ Type							
Senate President	ment For: Primary General Other (specify)								
State: District:									
Full Name (Last, First, Middle Initial) Phyllis Dickerson			Transaction ID: SB21B-1887 Date of Disbursement						
Mailing Address 2219 Singleton Cove			111						
	State Zip Code AR 72204		Amount of Each Disbursement this Period						
Purpose of Disbursement Travel & Subsistence Expense Reimb			800.00						
Candidate Name		Category/ Type							
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)								
State: District:	(-P)/ <b>V</b>								
SUBTOTAL of Disbursements This Page (optional) .		<b></b>	877.00						

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

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SCHEDULE B (FEC Form 3X)		FORLINE	NUMBER: DAGE 75 / 000
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	
II LMIZED DISBORSEMENTS	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30c
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1888
Deesha A. Dyer			Date of Disbursement
Mailing Address 1603 C Street, SE			111
City Washington	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		• •	20.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Deesha A. Dyer			Transaction ID: SB21B-1889 Date of Disbursement
Mailing Address 1603 C Street, SE			1 1 M M M M M M M M M M M M M M M M M M
City Washington	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement		•	50.00
Airline Baggage Fees Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	71.	
State: District:			
Full Name (Last, First, Middle Initial)  Deesha A. Dyer			<b>Transaction ID:</b> SB21B-1890 Date of Disbursement
Mailing Address 1603 C Street, SE			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 3 & 0 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Washington	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		• •	568.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		
State: District:	•		
SURTOTAL of Dichursements This Page (optional)			638.00

SCHEDULE B (FEC Form 3X)		arate schedule(s)		FOR LINE N								_
TEMIZED DISBURSEMENTS		category of the Summary Page	×	_	2	· _	23 28b	П	24 28c	25 29	F	26 30
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NAME OF COMMITTEE (In Full)	ame and addre	ss of any political	COMMI	illee to s	OIICIL C	OHUID	JULIONS II	OIII 8	such co	ommillee		
DEMOCRATIC NATIONAL COMMITTE	E - TRAVEL	OFFSET ACC	TNUC	-								
Full Name (Last, First, Middle Initial) HANNAH EDWARDS						ate of	ction ID Disburs	eme		3-1891		
Mailing Address 432 10th Street, NE						м м 1 1	/ D3	3 0	/ Y	ž 0 1	0 <sup>Y</sup>	
City	State	Zip Code			Aı	moun	t of Each	n Dis	burser	ment this	Perio	bc
Washington	DC	20002			- [					20.0	n	
Purpose of Disbursement Travel Expense						-				20.0	Ų.	_
Candidate Name			Cate	gory/ pe								
Office Sought: House Disbute Senate President State: District:	rsement For: Primary Other (spe	General ecify) ▼										
Full Name (Last, First, Middle Initial) HANNAH EDWARDS							ction ID Disburs	_		3-1892		
Mailing Address 432 10th Street, NE					-	м м <b>1</b> 1	/ D3	3 0	/ <b>Y</b>	ž 0 1	0 <sup>Y</sup>	
City	State	Zip Code			Aı	moun	t of Each	n Dis	burser	ment this	Perio	
Washington	DC	20002							-	50.0	•	_
Purpose of Disbursement Airline Baggage Fees			,		L	_				50.0	Ů	_
Candidate Name			Cate	gory/								
Office Sought:  Senate  President  State:  Disbut	rsement For: Primary Other (spe	General ecify) ▼		•								
Full Name (Last, First, Middle Initial) HANNAH EDWARDS							ction ID Disburs			3-1893		
Mailing Address 432 10th Street, NE					[	м м <b>1 1</b>	/ D3	3 0	/ Y	ž 0 1	0 <sup>Y</sup>	
City	State	Zip Code			Aı	moun	t of Each	n Dis	burser	ment this	Perio	od
Washington Purpose of Disbursement Travel & Subsistence Expense Reimb	DC	20002		-	[					800.0	0	_
Candidate Name				gory/ pe								
Office Sought: House Disbute Senate President State: District:	rsement For: Primary Other (spe	General ecify) ▼		<u> </u>								
SUBTOTAL of Disbursements This Page (options	al)			<u> </u>		•				870.0	0	_
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s)		NUMBER: PAGE 77 / 260  one) 22 23 24 25 26
		27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	DUNT	
Full Name (Last, First, Middle Initial) Kathryn Edwards			Transaction ID: SB21B-1894 Date of Disbursement
Mailing Address 115 W. Monument Ave.,	Apt 1001		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 3 & 0 \\ 3 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
,	State Zip Code OH 45402		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			58.30
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Kathryn Edwards			Transaction ID: SB21B-1895 Date of Disbursement
Mailing Address 115 W. Monument Ave.,	Apt 1001		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & 3 & 0 \\ 0 & 3 & 0 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
,	State Zip Code OH 45402		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			23.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Kathryn Edwards			Transaction ID: SB21B-1896 Date of Disbursement
Mailing Address 115 W. Monument Ave.,	Apt 1001		$\begin{bmatrix} M & M & M \\ 1 & 1 & M \end{bmatrix} / \begin{bmatrix} D & 3 & 0 \\ 3 & 0 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	State Zip Code OH 45402		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		•	800.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	881.30

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SCHEDULE B (FEC Form 3X)		FORLINE	NUMBER DAGE 70 / 000
ITEMIZED DISBURSEMENTS	Use separate schedule(s)   (chase		NUMBER: PAGE 78 / 260 one)
TI LIMIZED DISBORSEMENTS	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) ROGER FISK			Transaction ID: SB21B-1897 Date of Disbursement
Mailing Address 1426 Florida Avenue, NV	V		$\begin{bmatrix}\begin{smallmatrix}M\\1\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}M\\M\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}D\\3\end{smallmatrix}} \begin{bmatrix}0\\3\end{smallmatrix} \begin{bmatrix}0\\0\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}Y\\2\end{smallmatrix}} \begin{bmatrix}Y\\3\end{smallmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \begin{bmatrix}Y\\3\end{smallmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \end{bmatrix} \begin{bmatrix}Y\\2\end{smallmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \end{bmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \end{bmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \end{bmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \end{bmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \end{bmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \begin{bmatrix}Y\\1\end{smallmatrix} \end{bmatrix} \begin{bmatrix}Y\\Y\\Y\\Y\\Y\\Y\\Y\\Y\\$
,	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			69.25
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) ROGER FISK			Transaction ID: SB21B-1898 Date of Disbursement
Mailing Address 1426 Florida Avenue, NV	V		$\begin{bmatrix} \begin{smallmatrix} M & M & M \\ 1^M & 1^M & M \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 3 & 0 \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $
,	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			497.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Megan Glenn			Transaction ID: SB21B-1899 Date of Disbursement
Mailing Address 823 Park Street			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 3 & 0 \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$
	State Zip Code OH 43215		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			32.01
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
SURTOTAL of Dishursements This Page (ontional)			598.26

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	ED DISBURSEMENTS Use separate schedule(s) for each category of the		NUMBER: PAGE 79 / 260 one) 22 23 24 25 26
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCC	DUNT	
Full Name (Last, First, Middle Initial) Megan Glenn			Transaction ID: SB21B-1900 Date of Disbursement
Mailing Address 823 Park Street			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & 3 & 0 \\ 3 & 0 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
•	State Zip Code OH 43215		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			700.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) Guthrie Graves-Fitzsimmons			Transaction ID: SB21B-1901 Date of Disbursement
Mailing Address 315 W. 14th Street			$\begin{bmatrix} 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 $
•	State Zip Code TX 77008		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			497.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼		
State: District: Full Name (Last, First, Middle Initial)			
DAVID GREELISH			Transaction ID: SB21B-1902 Date of Disbursement
Mailing Address 69 Galen Street, #5			111
	State Zip Code MA 02472		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			800.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	. ,,,,	
State: District:	Carior (opcony)		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	1997.00

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

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	7 one)
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	and address of any pointed		
DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) THOMAS GRIFFIN			Transaction ID: SB21B-1903 Date of Disbursement
Mailing Address 56 Londonderry Road			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 3 & 0 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
City Marblehead	State Zip Code MA 01945		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			25.00
Candidate Name		Category/ Type	
Office Sought: House Disbursi Senate President State: District:	ement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial) THOMAS GRIFFIN			Transaction ID: SB21B-1904 Date of Disbursement
Mailing Address 56 Londonderry Road			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 3 & 0 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Marblehead	State Zip Code MA 01945		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			800.00
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Margo Hennigan			Transaction ID: SB21B-1905 Date of Disbursement
Mailing Address 1727 Massachusetts Ave	e., NW		$\begin{bmatrix} M & M & M \\ 1 & 1 & M \end{bmatrix} / \begin{bmatrix} D & D & D \\ 3 & 0 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
City Washington	State Zip Code DC 20036		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			40.43
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District:			
SUBTOTAL of Disbursements This Page (optional)			865.43

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	7 one)  22
Any Information copied from such Reports and State or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full)	The and address of any pointed		ion contributions from such committee
DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACC	TNUC	
Full Name (Last, First, Middle Initial) Margo Hennigan			Transaction ID: SB21B-1906 Date of Disbursement
Mailing Address 1727 Massachusetts Av #308	e., NW		1 1 M M M M M M M M M M M M M M M M M M
City Washington	State Zip Code DC 20036		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		• •	196.33
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President State: District:	sement For: Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) JENNIFER HUGHES			Transaction ID: SB21B-1907 Date of Disbursement
Mailing Address 1816 NEW HAMPSHIR #509	E AVE., NW		$\begin{bmatrix} \begin{smallmatrix} M & 1 & M \\ 1 & 1 & M \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} D & D \\ 3 & 0 \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 1 & 0 & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 1 & 0 & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 1 & 0 & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 1 & 1 & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 1 & 1 & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 1 & Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Y & Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Y & Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Y & Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Y & Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y \end{bmatrix} & \begin{bmatrix} Y \\ Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y \end{bmatrix} & \begin{bmatrix} Y \\ Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y \end{bmatrix} & \begin{bmatrix} Y \\ Y \end{bmatrix} & \mathbf{Y} \end{bmatrix} & \begin{bmatrix} Y \\ Y \end{bmatrix} & \mathbf{Y} \end{bmatrix} & \mathbf{Y} $
City WASHINGTON	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			40.00
Candidate Name		Category/ Type	
Senate President	sement For: Primary General Other (specify) ▼		
State: District:  Full Name (Last, First, Middle Initial)			
JENNIFER HUGHES			Transaction ID: SB21B-1908 Date of Disbursement
Mailing Address 1816 NEW HAMPSHIR #509	E AVE., NW		$\begin{bmatrix} \begin{smallmatrix} M & M & M \\ 1 & 1 & M \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} D & D \\ 3 & 0 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 1 & 0 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 1 & 0 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 1 & 0 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 1 & 0 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 1 & 0 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 1 & 0 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 1 & 0 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 1 & 0 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 1 & 1 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 1 & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ 2 & 1 & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ 2 & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ 2 & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y \end{bmatrix} & \begin{bmatrix} Y \\ Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y \end{bmatrix} & \begin{bmatrix} Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y \end{bmatrix} & \begin{bmatrix} Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y \end{bmatrix} & \begin{bmatrix} Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y \end{bmatrix} & \begin{bmatrix} Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y \\ Y \end{bmatrix} & \begin{bmatrix} Y & Y \end{bmatrix} & \mathbf{Y} \end{bmatrix}$
City WASHINGTON	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			25.00
Candidate Name		Category/ Type	
Senate President	sement For:  Primary General  Other (specify) ▼		
State: District:			

В.

C.

SCHEDULE B (FEC Form 3X)		arate schedule(s)				R LINE NUMBER:									
ITEMIZED DISBURSEMENTS		category of the Summary Page		_	21b 27		22 28a		23 28b	F	24 28c		25 29	26 30k	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name														3	
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL	OFFSET ACC	1UO	N.	Т										
Full Name (Last, First, Middle Initial) JENNIFER HUGHES							Date		isburs	em				Y	
Mailing Address 1816 NEW HAMPSHIRE #509	AVE., NV	V					11		/ D3	3 0		2	0 1 (	)	
•	State DC	Zip Code 20009					Amou	int o	f Each	ı D	isburse	-			
Purpose of Disbursement Travel & Subsistence Expense Reimb							L.					.8	00.00	)	
Candidate Name					egory/ ype										
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General ecify) ▼													
Full Name (Last, First, Middle Initial) Thomas Keady, Jr.									ion ID:		SB21I	3-19	910		
Mailing Address 23 ANSONIA ROAD								М	/ D	3 0		Ź	010	) Y	
•	State MA	Zip Code 02132					Amou	int o	f Each	ı D	isburse	men	t this I	Period	
Purpose of Disbursement Travel & Subsistence Expense Reimb							L.	_				.8	00.00	)	
Candidate Name					egory/ ype										
Senate President	ment For: Primary Other (spe	General ecify) ▼			•										
Full Name (Last, First, Middle Initial)							Trans	act	ion ID:	:	SB211	3-19	911		
DURWIN LAIRY	- <b>-</b>							of D	isburs			( )	010	Y	
Mailing Address 1006 EAST 11TH STREE		7:- Ondo					-								
NÓRTH LITTLE ROCK	State AR	Zip Code 72114					Amou	int o	of Each	ט ו	isburse	-			
Purpose of Disbursement Travel & Subsistence Expense Reimb									•			, 5	00.00	,	
Candidate Name					egory/ ype										
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General ecify) ▼													
State: District:	, , ,	· , •								_					
SUBTOTAL of Disbursements This Page (optional) .					. •							21	00.00		

C.

SCHEDULE B (FEC Form 3X)			NUMBER: PAGE 83 / 260
ITEMIZED DISBURSEMENTS	for each category of the	(check only	<sup>7</sup> one) ☐ 22
	Detailed Summary Page		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1912
Brandon Lepow			Date of Disbursement
Mailing Address 2401 Calvert St., NW, Ap	ot. 509		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & 3 & 0 \\ 3 & 0 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
,	State Zip Code DC 20008		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			28.16
Candidate Name		Category/ Type	
	ment For:		
Senate President	Primary General Other (specify) ▼		
State: District:	· ·		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1913
Brandon Lepow			Date of Disbursement
Mailing Address 2401 Calvert St., NW, Ap	ot. 509		111 M / D 3 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington	State Zip Code DC 20008		Amount of Each Disbursement this Period
Purpose of Disbursement			25.39
Airline Baggage Fees Candidate Name		Category/	
		Type	
Office Sought: House Disburse	ment For:  Primary General		
President	Other (specify)		
State: District:	· · · · · · · · · · · · · · · · · · ·		
Full Name (Last, First, Middle Initial) Brandon Lepow			Transaction ID: SB21B-1914
<u> </u>			Date of Disbursement    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
Mailing Address 2401 Calvert St., NW, Ap	ot. 509		11 30 2010
City Washington	State Zip Code DC 20008		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		•	80.46
Candidate Name		Category/ Type	
	ment For:		
Senate President	Primary General Other (specify) ▼		
State: District:	Other (apoonly)		
SUBTOTAL of Dichureamente This Page (ontional)			134.01

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)  DEMOCRATIC NATIONAL COMMITTEE			
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1915
Katherine Lillie			Date of Disbursement
Mailing Address 1840 13th Street, NW			$\begin{bmatrix} 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 $
City Washington	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			78.59
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1916
Katherine Lillie			Date of Disbursement
Mailing Address 1840 13th Street, NW			$ \begin{bmatrix} M & M \\ 1 & 1 \end{bmatrix}  \begin{bmatrix} D & D \\ 3 & 0 \end{bmatrix}  \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $
City Washington	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			497.00
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Anna Markowitz			Transaction ID: SB21B-1917 Date of Disbursement
Mailing Address 320 Hicks Street, Apt 4			$ \begin{bmatrix} M & M \\ 1 & 1 \end{bmatrix}  \begin{bmatrix} D & 0 & D \\ 3 & 0 & D \end{bmatrix}  \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $
City Brooklyn	State Zip Code NY 11201		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		-	97.01
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)	- 75-9	
State: District:			
SUBTOTAL of Disbursements This Page (optional)			672.60

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SCHEDULE B (FEC Form 3X)	Han apparate ashedul-(-)	FOR LINE I	NUMBER: PAGE 85 / 260				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only					
	Detailed Summary Page X 2 2						
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full)	не						
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT					
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1918				
Anna Markowitz			Date of Disbursement				
Mailing Address 320 Hicks Street, Apt 4			11				
,	State Zip Code NY 11201		Amount of Each Disbursement this Period				
Purpose of Disbursement Travel & Subsistence Expense Reimb		· · ·	500.00				
Candidate Name		Category/ Type					
	ment For:	.,,,,,					
Senate President	Primary General Other (specify) ▼						
State: District:	-						
Full Name (Last, First, Middle Initial) Kathryn Minor			Transaction ID: SB21B-1919 Date of Disbursement				
Mailing Address 1323 28th Street, NW			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & 3 & D \\ 3 & 0 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$				
,	State Zip Code DC 20007		Amount of Each Disbursement this Period				
Purpose of Disbursement	20007		26.64				
Events-Site Supplies Candidate Name		Catanand					
		Category/ Type					
Office Sought: House Disburse Senate	ment For:    Primary   General						
President	Other (specify)						
State: District: Full Name (Last, First, Middle Initial)			Towarding ID CD04D 4000				
Kathryn Minor			Transaction ID: SB21B-1920 Date of Disbursement				
Mailing Address 1323 28th Street, NW			111 30 7 2010				
	State Zip Code		Amount of Each Disbursement this Period				
Washington Purpose of Disbursement	DC 20007		28.00				
Travel Expense							
Candidate Name		Category/ Type					
° 🗎	ment For:	. 76-2					
Senate President	Primary General Other (specify)						
State: District:	Salor (opoony) 🔻						
SUBTOTAL of Disbursements This Page (optional) .			554.64				

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)			LINE NUMBER: PAGE 86 .ek only one)						86 /	260	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 21b 27		22 28a		23 28b	E	24 28c		25 29	26 30
Any Information copied from such Reports and States or for commercial purposes, other than using the name												3
NAME OF COMMITTEE (In Full)												
DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACC	OUN	IT									
Full Name (Last, First, Middle Initial) Kathryn Minor					<b>Transa</b> Date o				SB21E ent	3-19	921	
Mailing Address 1323 28th Street, NW					1 1	VI .	<sup>/</sup> 3	3 0	/ Y	ž	0 1 (	) Y
City Washington	State Zip Code DC 20007				Amour	nt o	f Each	ı Di	isburse	men	t this I	Period
Purpose of Disbursement Travel & Subsistence Expense Reimb										5	00.00	)
Candidate Name			tegory/ ype									
Senate President	ement For: Primary General Other (specify)											
State: District:												
Full Name (Last, First, Middle Initial) RYAN J MONTOYA					<b>Transa</b> Date o		-		SB21E ent	3-19	922	
Mailing Address 20 Altadena Drive					1 1	И .	<sup>/</sup> 3	3 0	/ Y	ž	0 1 (	) Y
City Pueblo	State Zip Code CO 81005				Amour	nt o	f Each	ı Di	isburse	men	t this I	Period
Purpose of Disbursement Travel Expense											83.00	)
Candidate Name			tegory/ ype									
Office Sought:    House   Disburs	ement For: Primary General Other (specify)											
Full Name (Last, First, Middle Initial)												
RYAN J MONTOYA					Date o	f Di	isburs	em				V
Mailing Address 20 Altadena Drive					11	M .	′	3 0		Ž	0 1 (	י נ
City Pueblo	State Zip Code CO 81005				Amour	nt o	f Each	ı Di	isburse			
Purpose of Disbursement Travel & Subsistence Expense Reimb						-				.8	00.00	)
Candidate Name			tegory/ ype									
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)											
State: District:	·											
SUBTOTAL of Disbursements This Page (optional)							-			13	83.00	)

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	NUMBER: PAGE 87 / 260
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	7 one) 22 23 24 25 26 28 28 28 28 28 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)  DEMOCRATIC NATIONAL COMMITTEE -	·		
/			
Full Name (Last, First, Middle Initial) PETER NEWELL			Transaction ID: SB21B-1924 Date of Disbursement
Mailing Address 2401 Calvert Street, NW	, Apt 924		111 D 30 / 2010
City Washington	State Zip Code DC 20008		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		•	62.01
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1925
PETER NEWELL			Date of Disbursement
Mailing Address 2401 Calvert Street, NW	, Apt 924		$\begin{bmatrix} M & M & M \\ 1 & 1 & M \end{bmatrix} / \begin{bmatrix} D & 3 & D \\ 3 & 0 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
City Washington	State Zip Code DC 20008		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			336.00
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
TYLER NORMAN			Transaction ID: SB21B-1926 Date of Disbursement
Mailing Address 128 W. 13th Street, #26			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & 3 & 0 \\ 0 & 3 & 0 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
City New York	State Zip Code NY 10011		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			193.66
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District:			
SUBTOTAL of Disbursements This Page (optional)			591.67

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for each category of the Detailed Summary Page   Telesk Only Offe)   21   22   23   24   25   26	SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 88 / 260
NAME OF COMMITTEE (In Full)  NAME OF COMMITTEE (In Full)  DEMOGRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT  Full Name (Last, First, Middle Initial) TYLER NORMAN  Mailing Address 128 W. 13th Street, #26  City New York NY 10011  Purpose of Disbursement Expense Reimb Cardidate Name  Office Sought: House President State: District:  Full Name (Last, First, Middle Initial) MARY OFFERMAN  Mailing Address 200 10TH STREET, SE  City WASHINGTON  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) MARY OFFERMAN  Mailing Address 200 10TH STREET, SE  City WASHINGTON  Office Sought: Senate President State: Districts  Full Name (Last, First, Middle Initial) MARY OFFERMAN  Mailing Address 200 10TH STREET, SE  City WASHINGTON  Office Sought: Senate Primary General Primary	ITEMIZED DISBURSEMENTS	for each category of the	X 21b	22 23	
NAME OF COMMITTEE (In Full)  DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT  Full Name (Last, First, Middle Initial) TYLER NORMAN  Mailing Address 128 W. 13th Street, #26  City New York Name Clate Opisbursement Travel & Subsistence Expense Reimb Candidate Name  Office Sought: House Senate President Alfine Baggage Fees Candidate Name  Office Sought: House Candidate Name  Disbursement For: State Zip Code NY 2010 1  Other (specify) ▼  Transaction ID: SB21B-1928 Date of Disbursement this Period  Amount of Each Disbursement this Period  Transaction ID: SB21B-1928 Date of Disbursement this Period  Amount of Each Disbursement this Period  Transaction ID: SB21B-1928 Date of Disbursement this Period  Transaction ID: SB21B-1928 Date of Disbursement  Alfine Baggage Fees Candidate Name  Office Sought: House Senate Primary General Primary General Primary General Other (specify) ▼  Transaction ID: SB21B-1929 Date of Disbursement this Period  Transaction ID: SB21B-1929 Date of Disbursement ID:					
TYLER NORMAN  Mailing Address 128 W. 13th Street, #26  City State Zip Code New York NY 10011  Purpose of Disbursement Travel & Subsistence Expense Reimb  Candidate Name  Other (specify) ▼  Category/ Type  Office Sought: State: Disbursement For: Senate Primary General Other (specify) ▼  Category/ Type  Transaction ID: SB21B-1928  Date of Disbursement this Period  Amount of Each Disbursement this Period  Amount of Each Disbursement this Period  Transaction ID: SB21B-1928  Date of Disbursement this Period  Transaction ID: SB21B-1928  Date of Disbursement this Period  Amount of Each Disbursement this Period  Transaction ID: SB21B-1928  Date of Disbursement this Period  Transaction ID: SB21B-1928  Date of Disbursement this Period  Transaction ID: SB21B-1929  Date of Disbursement this Period  Transac	NAME OF COMMITTEE (In Full)				
Amount of Each Disbursement Interest Amount of Each Disbursement Interest Senate Primary General Other (specify) ▼  City State: District:  Full Name (Last, First, Middle Initial) MARY OFFERMAN  Mailing Address 200 10TH STREET, SE  City Senate Primary General Other (specify) ▼  Category/ Type  Transaction ID: SB21B-1928 Date of Disbursement For: Senate Primary General Other (specify) ▼  Category/ Type  Transaction ID: SB21B-1928 Date of Disbursement For: Senate Primary General Other (specify) ▼  Transaction ID: SB21B-1928 Date of Disbursement For: Senate Primary General Other (specify) ▼  Transaction ID: SB21B-1929 Date of Disbursement For: Senate Primary General Other (specify) ▼  Transaction ID: SB21B-1929 Date of Disbursement For: Senate Primary General Other (specify) ▼  City WASHINGTON DC 20003-2117  Purpose of Disbursement For: Senate Primary General Other (specify) ▼  City WASHINGTON DC 20003-2117  Purpose of Disbursement For: General Other (specify) ▼  City WASHINGTON DC 20003-2117  Purpose of Disbursement For: General Other (specify) ▼  Category/ Type  Category/ Type  Category/ Type  Category/ Type  Office Sought: House Disbursement For: General Other (specify) ▼  Category/ Type  Category/ Type  Office Sought: House Disbursement For: General Other (specify) ▼  Category/ Type  Category/ Type  Office Sought: House Disbursement For: General Other (specify) ▼  Category/ Type  Category/ Type  Category/ Type  Category/ Type  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼	•			Date of Disburseme	-
New York NY 10011  Purpose of Disbursement Travel & Subsistence Expense Reimb  Candidate Name  Office Sought: House Senate President District:  Full Name (Last, First, Middle Initial)  MARY OFFERMAN  Mailing Address 200 10TH STREET, SE  City Senate President Disbursement Arithe Baggage Fees  Candidate Name  Office Sought: House Senate President Disbursement For: Senate President District:  Full Name (Last, First, Middle Initial)  MARY OFFERMAN  Mailing Address 200 10TH STREET, SE  City Senate President Other (specify) ▼  Amount of Each Disbursement this Period  Amount of Each Disbursement Disbursement For: Senate President Other (specify) ▼  Transaction ID: SB21B-1928 Date of Disbursement this Period  Amount of Each Disbursement Disbursement For: Senate President Disbursement Disburseme	Mailing Address 128 W. 13th Street, #26			111 / 30	<sup>'</sup> 2010 <sup>'</sup>
Travel & Subsistence Expense Reimb Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MARY OFFERMAN  Mailing Address 200 10TH STREET, SE  City Senate President Other (specify) ▼  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  Category/ Type  Amount of Each Disbursement this Period  Transaction ID: SB21B-1928 Date of Disbursement this Period  Amount of Each Disbursement this Period  Transaction ID: SB21B-1928 Date of Disbursement this Period  Amount of Each Disbursement this Period  Transaction ID: SB21B-1928 Date of Disbursement this Period  Transaction ID: SB21B-1928 Date of Disbursement this Period  Transaction ID: SB21B-1929 Date of Disbursement this Period  Transaction ID: SB21B-1928 Date of Disbursement this Period				Amount of Each Dis	bursement this Period
Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MARY OFFERMAN  Mailing Address 200 10TH STREET, SE  City WASHINGTON DC 20003-2117  Purpose of Disbursement Airline Baggage Fees Candidate Name  Office Sought: House President Other (specify) ▼  State Disbursement For: Senate Primary General Other (specify) ▼  Transaction ID: SB21B-1928 Date of Disbursement this Period  Amount of Each Disbursement this Period  Type  Office Sought: House Senate Primary General Other (specify) ▼  Transaction ID: SB21B-1929 Date of Disbursement this Period  Transaction ID: SB21B-1929 Date of Disbursement Tirule & Subsistence Expense Reimb  Category/ Type  Office Sought: House Disbursement Tirule & Subsistence Expense Reimb  Candidate Name  Office Sought: House Disbursement For: State Zip Code WASHINGTON DC 20003-2117  Purpose of Disbursement Tirule & Subsistence Expense Reimb  Candidate Name  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼					800.00
Senate President State: District:  Full Name (Last, First, Middle Initial) MARY OFFERMAN  Mailing Address 200 10TH STREET, SE  City WASHINGTON DC 20003-2117  Purpose of Disbursement Airline Baggage Fees Candidate Name  Office Sought: House Primary General Other (specify) ▼  Office Sought: Other (specify) ▼  City WASHINGTON DC 20003-2117  Purpose of Disbursement Airline Baggage Fees Candidate Name  Office Sought: House President State: District:  Full Name (Last, First, Middle Initial) MARY OFFERMAN  Mailing Address 200 10TH STREET, SE  City WASHINGTON DC 20003-2117  Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Office Sought: House Category/Type  Office Sought: House Senate Primary General Other (specify) ▼  Office Sought: House Senate Primary General Other (specify) ▼  Office Sought: House Senate Primary General Other (specify) ▼	· · · · · · · · · · · · · · · · · · ·				
MARY OFFERMAN  Mailing Address 200 10TH STREET, SE  City WASHINGTON DC 20003-2117  Purpose of Disbursement Airline Baggage Fees Candidate Name  Disbursement For: Senate Primary General Other (specify)  MARY OFFERMAN  Mailing Address 200 10TH STREET, SE  City WASHINGTON  Mailing Address 200 10TH STREET, SE  City WASHINGTON  State  City WASHINGTON  Mailing Address Disbursement  City WASHINGTON  City WASHINGTON  City WASHINGTON  City WASHINGTON  City WASHINGTON  Category/ Type  City City City City City City City Category/ City City City City City City City City	Senate President	Primary General			
City WASHINGTON DC 20003-2117  Purpose of Disbursement Airline Baggage Fees Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Transaction ID: SB21B-1929 Date of Disbursement  Mailing Address 200 10TH STREET, SE  City State Zip Code WASHINGTON DC 20003-2117  Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name  Disbursement For:  State Zip Code WASHINGTON DC 20003-2117  Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name  Disbursement For:  Senate Primary General Other (specify) ▼  Office Sought: House Senate Primary General Other (specify) ▼  Office Sought: House Other (specify) ▼  Other (specify) ▼  Amount of Each Disbursement this Period  Amount of Each Disbursement this Period  Other (specify) ▼  Other (specify) ▼  Other (specify) ▼	Full Name (Last, First, Middle Initial)			Date of Disburseme	ent
WASHINGTON  Purpose of Disbursement Airline Baggage Fees  Candidate Name  Office Sought: House Primary General  Persident State: District:  Full Name (Last, First, Middle Initial)  MARY OFFERMAN  Mailing Address 200 10TH STREET, SE  City  WASHINGTON  Purpose of Disbursement  Travel & Subsistence Expense Reimb  Candidate Name  Disbursement For:  State Zip Code  WASHINGTON  Purpose of Disbursement  Travel & Subsistence Expense Reimb  Candidate Name  Disbursement For:  Senate  Primary  General  Category/ Type  Office Sought: House  Senate  Primary  General  Other (specify) ▼  Transaction ID: SB21B-1929  Date of Disbursement  1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Mailing Address 200 10TH STREET, SE			111 30	2010
Airline Baggage Fees  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MARY OFFERMAN  Mailing Address 200 10TH STREET, SE  City State Zip Code WASHINGTON DC 20003-2117  Purpose of Disbursement Travel & Subsistence Expense Reimb  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Amount of Each Disbursement this Period Record Senate Primary General Other (specify) ▼  Office Sought: House Primary General Other (specify) ▼  Office Sought: President Other (specify) ▼  Other (specify) ▼				Amount of Each Dis	
Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) MARY OFFERMAN  Mailing Address 200 10TH STREET, SE  City State Zip Code WASHINGTON DC 20003-2117  Purpose of Disbursement Travel & Subsistence Expense Reimb  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Office Sought: House Senate Primary General Other (specify) ▼  Office Sought: Primary General Other (specify) ▼					50.00
Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) MARY OFFERMAN  Mailing Address 200 10TH STREET, SE  City State Zip Code WASHINGTON DC 20003-2117  Purpose of Disbursement Travel & Subsistence Expense Reimb  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Other (specify) ▼  Transaction ID: SB21B-1929 Date of Disbursement  Transaction ID: SB21B-1	Candidate Name				
Full Name (Last, First, Middle Initial) MARY OFFERMAN  Mailing Address 200 10TH STREET, SE  City State Zip Code WASHINGTON DC 20003-2117  Purpose of Disbursement Travel & Subsistence Expense Reimb  Candidate Name  Disbursement For: Senate Primary General Other (specify)  Other (specify)	Senate President	Primary General			
MARY OFFERMAN  Mailing Address 200 10TH STREET, SE  City State Zip Code WASHINGTON DC 20003-2117  Purpose of Disbursement Travel & Subsistence Expense Reimb  Candidate Name  Date of Disbursement  M M M M M M M M M M M M M M M M M M M				Transaction ID: S	SB21B-1929
City State Zip Code WASHINGTON DC 20003-2117  Purpose of Disbursement Travel & Subsistence Expense Reimb  Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate Primary General President Other (specify)  President Other (specify)	MARY OFFERMAN			Date of Disburseme	ent
WASHINGTON  Purpose of Disbursement  Travel & Subsistence Expense Reimb  Candidate Name  Category/ Type  Office Sought:  House Senate Primary President  Disbursement For: Senate Primary General Other (specify)  Type	Mailing Address 200 10TH STREET, SE			1 1 3 0	2010
Travel & Subsistence Expense Reimb  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify) ▼				Amount of Each Dis	
Office Sought:  Disbursement For:  Senate Primary Other (specify)  President  Type  Type	Travel & Subsistence Expense Reimb				800.00
Senate Primary General President Other (specify) ▼	Candidate Name				
State: District:	Senate President	Primary General			
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SCHEDULE B (FEC Form 3X)									R LINE NUMBER: PAGE 89 / 260 ck only one)											
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	_	(check X 21 27	b [	one) 22 28a	23 28b	24	, F	25 29	26 30b										
	r Information copied from such Reports and Statements may not be sold or used by any per or commercial purposes, other than using the name and address of any political committee																			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUN	ΙΤ																	
Full Name (Last, First, Middle Initial)  Joseph Paulsen					Date	of Disbu	) D /		930 2 0 1 (	Y										
Mailing Address 1600-B Beekman Place, I	NW				11		3 0		201	J										
Washington	State Zip Code DC 20009				Amou	ınt of Ead	ch Disburs	-	-											
Purpose of Disbursement Travel & Subsistence Expense Reimb								,	336.00	,										
Candidate Name			tegory/ 「ype	′																
Office Sought:  Senate President State:  Disburser	ment For: Primary General Other (specify) ▼																			
Full Name (Last, First, Middle Initial)					Trans	saction I	<b>D</b> : SB2	1R-1	931											
MATHEWS PIERSON					Date	of Disbu	rsement													
Mailing Address 70 I Street, SE, #713					1 1	M / [	30 /	Y 2	ž 0 1 (	o <sup>*</sup>										
,	State Zip Code DC 20003				Amou	ınt of Ead	ch Disburs	eme	nt this	Period										
Purpose of Disbursement Events-Site Supplies				7					129.60	5										
Candidate Name			tegory/ Type																	
Office Sought:    House   Disburse     Senate     President     State: District:	ment For: Primary General Other (specify)		71																	
Full Name (Last, First, Middle Initial)					Trans	saction I	<b>D</b> : SB2	1R-1	932											
MATHEWS PIERSON					Date	of Disbu	rsement													
Mailing Address 70 I Street, SE, #713					1 1	M / L	30 /	Y	ž 0 1 (	o <sup>*</sup>										
	State Zip Code DC 20003				Amou	ınt of Ea	ch Disburs	-												
Purpose of Disbursement Travel & Subsistence Expense Reimb				7				(	600.00	)										
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Office Sought: House Disbursel Senate President	ment For: Primary General Other (specify) ▼																			
State: District:																				
SUBTOTAL of Disbursements This Page (optional)				<u> </u>				10	65.60	5										

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SCHEDULE B (FEC Form 3X)		1						
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ITEMIZED DISBURSEMENTS	<b>ZED DISBURSEMENTS</b> for each category of the Detailed Summary Page							
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam								
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT						
Full Name (Last, First, Middle Initial) Stacy Porto			Transaction ID: SB21B-1933 Date of Disbursement					
Mailing Address 916 T Street, NW			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} D & D \\ 3 & 0 \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$					
City	State Zip Code		Amount of Each Disbursement this Period					
Washington Purpose of Disbursement	DC 20001		51.00					
Travel Expense Candidate Name		Category/ Type						
Senate President	ement For: Primary General Other (specify)	Турс						
State: District:								
Full Name (Last, First, Middle Initial) Stacy Porto			Transaction ID: SB21B-1934 Date of Disbursement					
Mailing Address 916 T Street, NW			1 1 M 1 M / D 3 D / Y Y Y O Y O Y					
City Washington	State Zip Code DC 20001		Amount of Each Disbursement this Period					
Purpose of Disbursement Travel & Subsistence Expense Reimb		• •	700.00					
Candidate Name		Category/ Type						
Office Sought: House Disburse Senate President	ement For:    Primary							
State: District:								
Full Name (Last, First, Middle Initial) Cole Randle			Transaction ID: SB21B-1935 Date of Disbursement					
Mailing Address 8200 Wisconsin Ave., #	417		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ \begin{smallmatrix} D \\ 3 & 0 \end{smallmatrix} \ \begin{smallmatrix} D \\ 3 & 0 \end{smallmatrix} \ \begin{smallmatrix} V \\ 2 & 0 & 1 & 0 \end{smallmatrix}$					
City Bethesda	State Zip Code MD 20814		Amount of Each Disbursement this Period					
Purpose of Disbursement Travel Expense	·		90.75					
Candidate Name		Category/ Type						
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)							
State: District:								
SURTOTAL of Dichursements This Page (optional)			841.75					

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SCHEDULE B (FEC Form 3X)		FOR LINE	NII IMPED:	PAGE 91 / 260
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only		
	Detailed Summary Page	X 21b 27	22 23 28b 28b	24 25 26 28c 29 30k
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NAME OF COMMITTEE (In Full)				
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT		
Full Name (Last, First, Middle Initial) Cole Randle			Transaction ID: S Date of Disbursemen	
Mailing Address 8200 Wisconsin Ave., #1	417		11 1	<sup>'</sup> 2010 <sup>'</sup>
City Bethesda	State Zip Code MD 20814		Amount of Each Disl	oursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb	20011			700.00
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	71.		
State: District:	Ctrici (specify)			
Full Name (Last, First, Middle Initial) Elisabeth Reiter			Transaction ID: S Date of Disbursemen	
Mailing Address 5 16th Street, NE			111 / 30	2010
City Washington	State Zip Code DC 20002		Amount of Each Disl	oursement this Period
Purpose of Disbursement Travel Expense				78.01
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) Elisabeth Reiter			Transaction ID: S Date of Disbursemen	
Mailing Address 5 16th Street, NE			111 / 30	2010
City Washington	State Zip Code DC 20002		Amount of Each Disl	oursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb	-			600.00
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)			
State: District:	, , , , , <del>,</del>			
SURTOTAL of Dichursements This Page (ontional)				1378.01

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SCHEDULE B (FEC Form 3X)		1 === - :	NE NUMBER	PAGE 22 / 52 7
•	Use separate schedule(s) for each category of the		NE NUMBER: only one)	PAGE 92 / 260
ITEMIZED DISBURSEMENTS	Detailed Summary Page	X 21b		24 25 26
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or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNI		
Full Name (Last, First, Middle Initial) IAN ROSE			Transaction ID: S Date of Disbursement	
Mailing Address 147 D Street, SE			111 / D30	2010
City Washington	State Zip Code DC 20003		Amount of Each Dis	bursement this Period
Purpose of Disbursement Travel Expense	20003			48.00
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) IAN ROSE			Transaction ID: S Date of Disbursement	nt
Mailing Address 147 D Street, SE			111 / 30	2010
City Washington	State Zip Code DC 20003		Amount of Each Dis	bursement this Period
Purpose of Disbursement Airline Baggage Fees				25.00
Candidate Name		Category/ Type	1	
Senate President	ment For: Primary General Other (specify)			
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IAN ROSE			Date of Disburseme	-
Mailing Address 147 D Street, SE			111 / D30	2010
City Washington	State Zip Code DC 20003		Amount of Each Dis	bursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		v v		800.00
Candidate Name		Category/ Type		
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State: District:	· · · · · · · · · · · · · · · · · · ·			
SUBTOTAL of Disbursements This Page (optional)				873.00

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	NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -												
<b>А</b> .	Full Name (Last, First, Middle Initial) IAN ROSE						Date	of D	isburse			-	
	Mailing Address 147 D Street, SE					11	М	<sup>′</sup> 3	0 /	Ý 2	2 0 1 C	)	
	City Washington		Amou	int o	f Each	Disburs	emer						
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	Candidate Name				ateg Typ	,							
	Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General cify) ▼										
_	State: District:												
В.	Full Name (Last, First, Middle Initial) IAN ROSE						Date	of D	isburse	SB21 ement	B-1	943	
	Mailing Address 147 D Street, SE						1 <sup>M</sup> 1	М	<sup>′</sup> 3	0 /	Y 2	Σ́ο i c	) <sup>Y</sup>
	City Washington	State DC	Zip Code 20003				Amou	int o	f Each	Disburs	emer	nt this F	Period
	Purpose of Disbursement Train Travel			Г	_			-				35.00	
	Candidate Name			С	ateg								
	Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General cify) ▼										
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C.	Full Name (Last, First, Middle Initial) IAN ROSE						Date		isburse				V
	Mailing Address 147 D Street, SE						1 1		3	0 /	2	2010	)
	City Washington	State DC	Zip Code 20003				Amou	int o	f Each	Disburs	emer	nt this F	Period
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	SUBTOTAL of Disbursements This Page (optional)										7	60.00	
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	Information copied from such Reports and Statements may not be sold or used by any per commercial purposes, other than using the name and address of any political committee													5	
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL	OFFSET ACC	1UO	N <sup>-</sup>	Γ										
Full Name (Last, First, Middle Initial) JESSE J ROSEN							Date		isburs	em				V	
Mailing Address 1045 W. County Line Roa	ad						1 1		/ D	3 0		2	0 1 (	)	
	State WI	Zip Code 53217					Amou	nt o	f Each	ı D	isburse	-	-	-	d
Purpose of Disbursement Travel Expense				·				-				1	94.00	)	
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JESSE J ROSEN							Date		isburs	em	nent			Y	
Mailing Address 1045 W. County Line Roa	ad						1 1			3 0		2	010	)	
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Mailing Address 4849 Connecticut Ave., N Apt 412	1W						1 1			3 6		2	010	)	
	State DC	Zip Code 20008					Amou	nt o	f Each	ı D	isburse	emen	t this I	Period	d
Purpose of Disbursement Travel & Subsistence Expense Reimb				v			L.					.7	00.00	)	
Candidate Name					egory/ /pe										
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General			<u> </u>										
State: District:	1 3: (-10)	<i>,</i> , <b>▼</b>													
SUBTOTAL of Disbursements This Page (optional) .					. •							15	94.00	)	

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SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE I (check only X 21b 27	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		by any person fo	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	UNT	
Full Name (Last, First, Middle Initial) Kathleen Gluntz Skarin			Transaction ID: SB21B-1948 Date of Disbursement
Mailing Address 64 Sullivan Street, #3			$\begin{bmatrix} 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 $
•	State Zip Code MA 02129		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		•	19.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)	71	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1949
Kathleen Gluntz Skarin			Date of Disbursement
Mailing Address 64 Sullivan Street, #3			$\begin{bmatrix} \mathbf{M} & \mathbf{M} \\ 1 & 1 \end{bmatrix} / \begin{bmatrix} \mathbf{D} & 0 \\ 3 & 0 \end{bmatrix} / \begin{bmatrix} \mathbf{Y} & \mathbf{Y} & \mathbf{Y} & \mathbf{Y} \\ 2 & 0 & 1 & 0 \end{bmatrix}$
•	State Zip Code MA 02129		Amount of Each Disbursement this Period
Purpose of Disbursement			50.00
Airline Baggage Fees Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)	Туре	
State: District:  Full Name (Last, First, Middle Initial)			Transaction ID: CD01D 1050
Kathleen Gluntz Skarin			Transaction ID: SB21B-1950 Date of Disbursement
Mailing Address 64 Sullivan Street, #3			$\begin{bmatrix} \mathbf{M} & \mathbf{M} \\ 1 & 1 \end{bmatrix} / \begin{bmatrix} \mathbf{D} & 0 \\ 3 & 0 \end{bmatrix} / \begin{bmatrix} \mathbf{Y} & \mathbf{Y} & \mathbf{Y} & \mathbf{Y} \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	State Zip Code MA 02129		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		0 0	600.00
Candidate Name	l	Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	туре	
State: District:	outer (opeony) ▼		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	669.00

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)  (check									PA	AGE	96 / 2	260
ITEMIZED DISBURSEMENTS	ZED DISBURSEMENTS  for each category of the Detailed Summary Page    X   21   27   27   27   27   27   27   27									24 28c		25 29	26 30b
	nformation copied from such Reports and Statements may not be sold or used by any pers commercial purposes, other than using the name and address of any political committee to											outions	-
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET AC	COU	JN	Γ									
Full Name (Last, First, Middle Initial) Wayne Skinner  Mailing Address 1608 13th Street, NW						Date		sburs				951 0 1 (	) <sup>Y</sup>
	State Zip Code DC 20009					Amou	ınt of	Each	h Di	sburse	men	t this f	Period
Purpose of Disbursement Travel Expense Candidate Name			`otc	ngory/		L.	0				1	51.18	3
	ment For:			egory/ /pe									
Senate President State: District:	Primary General Other (specify)	I											
Full Name (Last, First, Middle Initial) Wayne Skinner						Date	of Di	-		SB21I	3-19	952	
Mailing Address 1608 13th Street, NW						1 1	М	D.	3 0	] / [	Ž	0 1 C	) <sup>Y</sup>
,	State Zip Code DC 20009					Amou	ınt ol	Each	h Di	sburse	men	t this f	Period
Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name			`ate	egory/		L.	-				7	00.00	)
	ment For:			pe /pe									
Senate President State: District:	Primary General Other (specify) ▼	I											
Full Name (Last, First, Middle Initial) Anthony C. Smith						Trans				SB21I ent	3-19	953	
Mailing Address 6 Forest Avenue						1 1	М	D,	3 0	] / [	Ź	0 i 0	) <sup>Y</sup>
Salem	State Zip Code MA 01970					Amou	int of	Each	h Di	sburse	-	t this f	
Purpose of Disbursement Travel Expense Candidate Name			Cate	egory/				•				44.74	
	ment For: Primary General Other (specify)			/pe									
State: District:	_ спо (эрсопу) ▼												
SUBTOTAL of Disbursements This Page (optional) .				. •							10	95.92	2

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SCHEDULE B (FEC Form 3X)		EOD LINE	NUMBER: PAGE 97 / 260
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
THE MILES BIODOTTOLINETT O	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem		d by any person f	or the purpose of soliciting contributions
or for commercial purposes, other than using the name	e and address of any politica	I committee to so	licit contributions from such committee
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	:OLINT	
/			
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1954
Anthony C. Smith			Date of Disbursement
Mailing Address 6 Forest Avenue			111 / 30 / 2010
•	State Zip Code MA 01970		Amount of Each Disbursement this Period
Purpose of Disbursement	MA 01970		800.00
Travel & Subsistence Expense Reimb			
Candidate Name		Category/ Type	
Office Sought: House Disburse	ement For:	туре	
Senate	Primary General		
President State: District:	Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-1955
JEFFREY TATE			Date of Disbursement
Mailing Address 1216 7th St., NW, Apt 10	)1		$\begin{bmatrix}\begin{smallmatrix}M&M&M\\1^M&M\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&3&D\\3&0\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y&Y\\2^M&1^M&0\end{smallmatrix}\end{bmatrix}$
City	State Zip Code		Amount of Each Disbursement this Period
	DC 20001		5.00
Purpose of Disbursement Travel Expense			3.00
Candidate Name		Category/ Type	
·	ement For:		
Senate President	Primary General  Other (specify)		
State: District:	g carrer (operany) 🔻		
Full Name (Last, First, Middle Initial) JEFFREY TATE			Transaction ID: SB21B-1956 Date of Disbursement
Mailing Address 1216 7th St., NW, Apt 10	)1		$\begin{bmatrix}\begin{smallmatrix}M\\1\end{smallmatrix}\end{bmatrix}, \begin{bmatrix}\begin{smallmatrix}M\\1\end{smallmatrix}\end{bmatrix}, \begin{bmatrix}\begin{smallmatrix}D\\3\end{smallmatrix}\end{bmatrix}, \begin{bmatrix}\begin{smallmatrix}Y\\1\end{smallmatrix}\end{bmatrix}, \begin{bmatrix}Y\\2\end{smallmatrix}\end{bmatrix}, \begin{bmatrix}Y\\1\end{smallmatrix}\end{bmatrix}$
	State Zip Code		Amount of Each Disbursement this Period
Washington Purpose of Disbursement	DC 20001		50.00
Airline Baggage Fees			
Candidate Name		Category/	
Office Sought: House Disburse	ement For:	Type	
Senate	Primary General		
State: President State:	Other (specify)		
SUBTOTAL of Disbursements This Page (optional) .			855.00

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		FOR LIN			R:		F	PAGE	98 /	260
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	۱,	(check o X 21b 27		ne) 22 28a	ш	23 28b	24	Ĺ	25 29	26 30b
Any Information copied from such Reports and States or for commercial purposes, other than using the nan			ny persoi	n for t	he pu	rpos	e of s	oliciting	contr	ibution	
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACC	OUN	IT								
Full Name (Last, First, Middle Initial) JEFFREY TATE					Date o		sburs	: SB2 ement			Y
Mailing Address 1216 7th St., NW, Apt 1	01				11		D 3	3 0		ž 0 Ť	0
City Washington	State Zip Code DC 20001				Amou	nt of	Each	Disbur		-	
Purpose of Disbursement Travel & Subsistence Expense Reimb							•			700.0	0
Candidate Name			tegory/ ype								
Senate President	ement For: Primary General Other (specify)										
State: District: Full Name (Last, First, Middle Initial)				-	Trans	actio	on ID:		1B-1	958	
Jeff Tiller						of Dis	D	ement	Y	YY	Y
Mailing Address 1025 G Street, NE					11	_	3	30	- 2	ž 0 1	0
City Washington	State Zip Code DC 20002				Amou	nt of	Each	Disbur	seme	nt this	Period
Purpose of Disbursement Travel Expense					L.					20.8	2
Candidate Name			tegory/ ype								
Office Sought: House Senate President State: District:	ement For: Primary General Other (specify) ▼										
Full Name (Last, First, Middle Initial) Jeff Tiller								: SB2 ement	1B-1	959	
Mailing Address 1025 G Street, NE					1 <sup>M</sup> 1	M /	D 3	3 O /	Y	ž 0 Ť	0 Y
City Washington	State Zip Code DC 20002				Amou	nt of	Each	Disburs	seme	nt this	Period
Purpose of Disbursement Airline Baggage Fees					<u>L.</u>					5.8	5
Candidate Name			tegory/ ype								
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)		урс								
State: District:											
SUBTOTAL of Disbursements This Page (optional)			▶						7	'26.6	7

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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: DACE 00 / 000
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
TI EMIZED DIODOTTOLINETTO	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	· · · · · · · · · · · · · · · · · · ·		
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) Jeff Tiller			Transaction ID: SB21B-1960 Date of Disbursement
Mailing Address 1025 G Street, NE			$\begin{bmatrix} M & M & M \\ 1 & 1 & M \end{bmatrix} / \begin{bmatrix} D & 3 & 0 \\ 3 & 0 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
City Washington	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		•	77.31
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) BRADLEY BECNEL			Transaction ID: SB21B-2031 Date of Disbursement
Mailing Address 1133 14th Street, NW, U	nit 509		$ \begin{bmatrix} M & M \\ 1 & 2 \end{bmatrix}  \begin{bmatrix} D & D & D \\ 0 & 2 \end{bmatrix}  \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $
City Washington	State Zip Code DC 20005		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			340.80
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) BRADLEY BECNEL			Transaction ID: SB21B-2032 Date of Disbursement
Mailing Address 1133 14th Street, NW, U	nit 509		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ D & D & D \end{smallmatrix} \end{bmatrix} \ \ \\ \begin{bmatrix} Y & Y & Y & Y & Y & Y \\ D & D & Y & Y \end{bmatrix} \ \ \\ \begin{bmatrix} Y & Y & Y & Y & Y \\ D & Y & Y & Y \\ D & Y & Y \end{bmatrix} \ \ \\ \begin{bmatrix} Y & Y & Y & Y & Y \\ Y & Y & Y & Y \\ Y & Y & Y \\ Y & Y & Y \end{bmatrix} \ \ \\ \begin{bmatrix} Y & Y & Y & Y \\ Y & Y & Y \\ Y & Y \\ Y & Y \end{bmatrix} \ \ \\ \begin{bmatrix} Y & Y & Y & Y \\ Y \end{bmatrix} \ \ \\ \begin{bmatrix} Y & Y & Y & Y \\ Y \\ Y & Y \\ Y \\ Y & Y \\ Y$
City Washington	State Zip Code DC 20005		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			497.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	·		
SURTOTAL of Dishursements This Page (ontional)			915.11

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE I (check only	
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	UNT	
Full Name (Last, First, Middle Initial) BRADLEY BECNEL			Transaction ID: SB21B-2033 Date of Disbursement
Mailing Address 1133 14th Street, NW, Ui	nit 509		12 M O D O D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
•	State Zip Code DC 20005		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		· · · ·	495.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
BRADLEY BECNEL			Transaction ID: SB21B-2034 Date of Disbursement
Mailing Address 1133 14th Street, NW, U	nit 509		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ 0 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
•	State Zip Code DC 20005		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			134.68
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
Kristina Broadie			Transaction ID: SB21B-2035 Date of Disbursement
Mailing Address 10606 Pinedale Drive			12 M / D D / Y Y Y Y Y Y
	State Zip Code MD 20901		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			37.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	Caron (opoonly) ▼		
SUBTOTAL of Disbursements This Page (optional) .			666.68

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

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE I (check only	
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	DUNT	
Full Name (Last, First, Middle Initial) Kristina Broadie			Transaction ID: SB21B-2036 Date of Disbursement
Mailing Address 10606 Pinedale Drive			12 M O D O D V Y Y O T O Y
,	State Zip Code MD 20901		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		· · ·	495.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			ODO/D 0007
MICHAEL BRUSH			Transaction ID: SB21B-2037 Date of Disbursement
Mailing Address 1755 T Street, NW			12
	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			81.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	nent For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
MICHAEL BRUSH			Transaction ID: SB21B-2038 Date of Disbursement
Mailing Address 1755 T Street, NW			12 M O D O D V Y Y O T O Y
	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement			448.00
Travel & Subsistence Expense Reimb  Candidate Name		Category/	
Office Sought: House Disburse Senate	Primary General	Туре	
President State: District:	Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional) .			1024.00

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

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	E NUMBER: PAGE 102 / 260					
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b					
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		by any person f	or the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)	dia dadiess of any political		ion contributions from each committee					
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT						
Full Name (Last, First, Middle Initial) MICHAEL BRUSH			Transaction ID: SB21B-2039 Date of Disbursement					
Mailing Address 1755 T Street, NW			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$					
,	State Zip Code DC 20009		Amount of Each Disbursement this Period					
Purpose of Disbursement Travel Expense			91.00					
Candidate Name		Category/ Type						
Senate President	ment For: Primary General Other (specify)							
State: District:								
Full Name (Last, First, Middle Initial) MICHAEL BRUSH			Transaction ID: SB21B-2040 Date of Disbursement					
Mailing Address 1755 T Street, NW			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $					
,	State Zip Code DC 20009		Amount of Each Disbursement this Period					
Purpose of Disbursement Travel & Subsistence Expense Reimb			568.00					
Candidate Name		Category/ Type						
Senate President	ment For: Primary General Other (specify)							
State: District:								
Full Name (Last, First, Middle Initial) Brandon Lepow			Transaction ID: SB21B-2041 Date of Disbursement					
Mailing Address 2401 Calvert St., NW, Ap	t. 509		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $					
	State Zip Code DC 20008		Amount of Each Disbursement this Period					
Purpose of Disbursement Travel Expense			41.26					
Candidate Name		Category/ Type						
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)							
State: District:	(-p)/ <b>V</b>							
SUBTOTAL of Disbursements This Page (optional) .		<b>)</b>	700.26					

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

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	NUMBER: PAGE 103 / 260 / one)
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and States or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACCO	UNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2042
Brandon Lepow			Date of Disbursement
Mailing Address 2401 Calvert St., NW, A	pt. 509		12 0 2 7 2 0 1 0
City Washington	State Zip Code DC 20008		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb	]		497.00
Candidate Name	,	Category/ Type	
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)		
State: District:	_		
Full Name (Last, First, Middle Initial) Joshua Lipsky			Transaction ID: SB21B-2043 Date of Disbursement
Mailing Address 1638 19th Street, NW			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} \ \ \\ \begin{bmatrix} N & M & M \\ N & N & M \end{bmatrix} \ \ \begin{bmatrix} N & N & N & N \\ N & N & N & N \\ N & N & N & N \end{bmatrix} \ \ \\ \begin{bmatrix} N & N & N & N \\ \end{bmatrix} \ \ \ \begin{bmatrix} N & N & N & N \\ \end{bmatrix} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$
City Washington	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			495.00
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President	ement For:  Primary General  Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) Joshua Lipsky			<b>Transaction ID:</b> SB21B-2044 Date of Disbursement
Mailing Address 1638 19th Street, NW			$\begin{bmatrix} \begin{smallmatrix} M & Z & M \\ 1 & 2 & M \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Washington	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			13.00
Candidate Name	,	Category/ Type	
Office Sought: House Disburs Senate President	ement For:  Primary General  Other (specify)		
State: District:	·		
SUBTOTAL of Disbursements This Page (optional)			1005.00

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SCHEDULE B (FEC Form 3X)		FORLINE	DAGE 404 /000
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	
TI LIMIZED DISBOTISEMENTS	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2045
Joshua Lipsky			Date of Disbursement
Mailing Address 1638 19th Street, NW			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
,	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees	20000		25.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	Турс	
State: District:			
Full Name (Last, First, Middle Initial) Joshua Lipsky			Transaction ID: SB21B-2046 Date of Disbursement
Mailing Address 1638 19th Street, NW			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
•	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			448.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Johanna Maska			<b>Transaction ID:</b> SB21B-2047 Date of Disbursement
Mailing Address 1133 14th Street, NW, #4	110		$ \begin{bmatrix} M & M \\ 1 & 2 \end{bmatrix} \begin{bmatrix} D & D \\ 0 & 2 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $
	State Zip Code DC 20005		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		0 0	13.87
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	· ·		
SURTOTAL of Dishursements This Page (ontional)			486.87

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ige# 11990128960			
SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only X 21b	
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam		by any person f	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	TRAVEL OFFSET ACCC	UNT	
Full Name (Last, First, Middle Initial) Johanna Maska			Transaction ID: SB21B-2048 Date of Disbursement
Mailing Address 1133 14th Street, NW, #  City Washington	410 State Zip Code DC 20005		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name  Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)	Category/ Type	459.75
Full Name (Last, First, Middle Initial) Brian Quinn  Mailing Address 2122 12th Place, NW			Transaction ID: SB21B-2049 Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington Purpose of Disbursement Travel Expense Candidate Name  Office Sought: House Senate President State: District:	State Zip Code DC 20009  ement For: Primary General Other (specify)	Category/ Type	Amount of Each Disbursement this Period 74.84
Full Name (Last, First, Middle Initial) Brian Quinn  Mailing Address 2122 12th Place, NW			Transaction ID: SB21B-2050 Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name	State Zip Code DC 20009  ement For: Primary General Other (specify)	Category/ Type	Amount of Each Disbursement this Period 568.00
State: District:	Suitor (Specify)		
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	1102.59

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SCHEDULE B (FEC Form 3X)		ate schedule(s)	FOR LINE I			E NUMBER: PAGE 106 / 260							
ITEMIZED DISBURSEMENTS		tegory of the ımmary Page		Ì	_	П	22 28a	П	23 28b	24 28	, F	25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name													
NAME OF COMMITTEE (In Full)													
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL O	FFSET ACC	OUN	V٦	Γ								
Full Name (Last, First, Middle Initial) Brian Quinn									-	SB2	1B-2	.051	
Brian Quinn							M	וט זכ	sburse	D /	Υ	Y _ Y	Y
Mailing Address 2122 12th Place, NW							1 2		0	2	_	ž 0 1	0
,		Zip Code 20009					Amou	nt of	f Each	Disbur	eme	nt this	Period
Purpose of Disbursement Travel Expense					-			0				38.0	0
Candidate Name			Ca	ate	egory/								
					/pe								
Senate President	ment For: Primary Other (specif	General <b>▼</b>											
State: District:				_									
Full Name (Last, First, Middle Initial) Brian Quinn									sburse		1B-2	052	
Mailing Address 2122 12th Place, NW							<sup>M</sup> 2	М	0	2 /	Υ	ž 0 1	0 ~
,		Zip Code 20009					Amou	nt of	f Each	Disbur	eme	nt this	Period
Purpose of Disbursement Travel & Subsistence Expense Reimb							L.	_				568.0	0
Candidate Name					egory/ /pe								
Senate President	ment For: Primary Other (specif	General <b>▼</b>			<u> </u>								
State: District:													
Full Name (Last, First, Middle Initial) Luke B. Rosa									on ID: sburse	SB2 ement	1B-2	053	
Mailing Address 55 U Street, NW							<sup>M</sup> 2	М	0	2 /	Υ	ž 0 1	0 Y
		Zip Code 20001					Amou	nt of	f Each	Disbur	eme	nt this	Period
Purpose of Disbursement	=					-						25.5	0
Travel Expense Candidate Name					2001/								
					egory/ /pe								
Office Sought: House Disburse Senate President	ment For: Primary Other (specif	General <b>▼</b>											
State: District:	-												
SUBTOTAL of Disbursements This Page (optional) .					. •						e	31.5	0

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SCHEDULE B (FEC Form 3X)		FOR LINE N	NUMBER: PAGE 107/260
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem		by any person fo	r the purpose of soliciting contributions
or for commercial purposes, other than using the name	e and address of any political co	ommittee to soli	cit contributions from such committee
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	UNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2054
Luke B. Rosa			Date of Disbursement
Mailing Address 55 U Street, NW			$\begin{bmatrix} 1 & 2 & M \\ 1 & 2 & M \end{bmatrix} / \begin{bmatrix} D & D \\ 0 & D \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	State Zip Code DC 20001		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		•	495.00
Candidate Name	,	Category/ Type	
Office Sought: House Disburse Senate	ment For:  Primary General	Ni	
President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Stephanie Temaat			Transaction ID: SB21B-2055 Date of Disbursement
Mailing Address 400 Sophy Street			$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 1 & 2 & M \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D & D \\ 0 & 2 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
City	State Zip Code		Amount of Each Disbursement this Period
Spearville	KS 67876		
Purpose of Disbursement Travel & Subsistence Expense Reimb		•	495.00
Candidate Name	,	Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Rachel Thomas			Transaction ID: SB21B-2056 Date of Disbursement
Mailing Address 303 South 40th Street			$\begin{bmatrix} 1 & 2 & 1 & 1 \\ 1 & 2 & 1 & 1 \\ 1 & 2 & 1 & 1 \end{bmatrix} \begin{bmatrix} 1 & 1 & 1 & 1 \\ 1 & 2 & 1 & 1 & 1 \\ 1 & 2 & 1 & 1 & 1 \\ 1 & 2 & 1 & 1 & 1 \end{bmatrix}$
	State Zip Code PA 19104		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		• •	495.00
Candidate Name	,	Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	. , , , ,	
State: District:			
SUBTOTAL of Disbursements This Page (optional)			1485.00

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) DEPARTMENT OF TREASURY			Transaction ID: SB21B-2057 Date of Disbursement
Mailing Address P.O. BOX 27800			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
,	State Zip Code DC 20038-7800		Amount of Each Disbursement this Period
Purpose of Disbursement Airfare		· ·	1469.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) Samantha Tubman			Transaction ID: SB21B-2058 Date of Disbursement
Mailing Address 1450 Church Street, Apt.	304		$ \begin{bmatrix} M & M \\ 1 & 2 \end{bmatrix} \begin{bmatrix} D & D \\ 0 & D \end{bmatrix} \begin{bmatrix} Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $
,	State Zip Code DC 20005		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		•	35.10
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Samantha Tubman			Transaction ID: SB21B-2059 Date of Disbursement
Mailing Address 1450 Church Street, Apt.	304		$\begin{bmatrix} M & M \\ 1 & 2 \end{bmatrix} & \begin{bmatrix} D & D \\ D & D \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	State Zip Code DC 20005		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			396.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	. , , ,	
State: District:	Tallor (opcolity)		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	1900.10

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

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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 109 / 260
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	v one)
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) Susan Watson			Transaction ID: SB21B-2060 Date of Disbursement
Mailing Address 16362 North Hawthorne I	ano		12 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
•	State Zip Code IL 62864		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees		•	25.00
Candidate Name		Category/	
Office Sought: House Disburse	ment For:	Туре	
Senate President	Primary General Other (specify) ▼		
State: District:	Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2061
Susan Watson			Date of Disbursement
Mailing Address 16362 North Hawthorne I	_ane		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ 0 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $
•	State Zip Code IL 62864		Amount of Each Disbursement this Period
Purpose of Disbursement	02004		495.00
Travel & Subsistence Expense Reimb			
Candidate Name		Category/ Type	
Office Sought: House Disburse	ment For:		
President	Primary General Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) PETER WEEKS			<b>Transaction ID:</b> SB21B-2062 Date of Disbursement
Mailing Address 1755 Euclid Street, NW,	Unit 1		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ & 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
	State Zip Code		Amount of Each Disbursement this Period
	DC 20009		57.69
Purpose of Disbursement Travel Expense			37.03
Candidate Name		Category/ Type	
Office Sought: House Disburse	ment For:	11	
Senate President	Primary General Other (specify) ▼		
State: District:	Other (specify)		
SURTOTAL of Dishursements This Page (optional)			577.69

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	NUMBER: PAGE 110 / 260 / one) 22
		27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) PETER WEEKS			Transaction ID: SB21B-2063 Date of Disbursement
Mailing Address 1755 Euclid Street, NW,	Unit 1		1 2 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		• •	497.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: CD01D 0570
AMERICAN EXPRESS			Transaction ID: SB21B-2573 Date of Disbursement
Mailing Address P O BOX 1270			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 7 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
,	State Zip Code NJ 07101		Amount of Each Disbursement this Period
Purpose of Disbursement	07101	-	118540.72
Prepaid Expenses Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		See Attached Memo Entry
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2573-10000
Budget Rent-A-Car			Date of Disbursement
Mailing Address 323 George Street			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
	State Zip Code CT 06511		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental		0 0	1075.72
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	1 300	[MEMO ITEM] Memo Entry
State: District:	outer (opeony) ▼		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	119037.72

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

SCHEDULE B (FEC Form 3X)	Use separate schedule(s	FOR LINI	E NUMBER: PAGE 111 / 260
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 2 28a 28b 28c 29
ny Information copied from such Reports and Stater r for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)	to and address of any pointed		olot contributions from such committee
DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACC	COUNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2573-20000
Budget Rent-A-Car			Date of Disbursement
Mailing Address Orlando Intl Airport  1 Airport Boulevard			1 2 M / D D 7 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Orlando	State Zip Code FL 32827		Amount of Each Disbursement this Period
Purpose of Disbursement			91.99
Car Rental			
Candidate Name		Category/ Type	
	ement For:	•	- [MEMO ITEM] Memo Entry
Senate President	Primary General Other (specify) ▼		,
State: District:	- in (cpcc)) •		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2573-30000
Budget Rent-A-Car			Date of Disbursement
Mailing Address 30th St Train Station & N	Market		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Philadelphia	State Zip Code PA 19103		Amount of Each Disbursement this Period
Purpose of Disbursement			2311.30
Car Rental Candidate Name		Category/	
		Type	[MEMO ITEM]
Office Sought: House Disburs Senate	ement For: Primary General		Memo Entry
President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) BUDGET-RENT-A-CAR			Transaction ID: SB21B-2573-40000 Date of Disbursement
			1 2 0 1 D D 7 2 0 1 0
Mailing Address 7000 AIRPORT WAY			12 07 2010
City PORTLAND	State Zip Code OR 97220		Amount of Each Disbursement this Period
Purpose of Disbursement	OR 9/220		2604.12
Car Rental			
Candidate Name		Category/ Type	
	ement For:	•	- [MEMO ITEM] Memo Entry
Senate President	Primary General Other (specify) ▼		
State: District:			
SUBTOTAL of Disbursements This Page (optional)			0.00
OUT OF DISDUISEMENTS THIS Fage (optional)		······	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
TOTAL This Period (last page this line number only			

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	NUMBER: PAGE 112 / 260 / one) 22
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	DUNT	
Full Name (Last, First, Middle Initial) BUDGET-RENT-A-CAR			Transaction ID: SB21B-2573-50000 Date of Disbursement
Mailing Address 2001 E PLUMB LANE			12 7 2010
•	State Zip Code NV 89502		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental		· · · ·	957.92
Candidate Name		Category/ Type	IMENO ITEM
Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify) ▼		[MEMO ITEM] Memo Entry
State: District: Full Name (Last, First, Middle Initial)			
Budget Rent-A-Car			Transaction ID: SB21B-2573-60000 Date of Disbursement
Mailing Address 6420 McNair Circle			$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 1 & 2 & M \end{smallmatrix} & \begin{bmatrix} \begin{smallmatrix} D & D & D \\ 0 & 7 & 7 \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}^{Y} \end{bmatrix}$
•	State Zip Code CA 95837		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental			628.85
Candidate Name		Category/ Type	[MEMO ITEM]
Office Sought: House Disburset Senate President	ment For: Primary General Other (specify) ▼		Memo Entry
State: District:			
Full Name (Last, First, Middle Initial) Budget Rent-A-Car			Transaction ID: SB21B-2573-70000 Date of Disbursement
Mailing Address 780 McDonnell Road			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix}$
	State Zip Code CA 94128		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental			3275.90
Candidate Name		Category/ Type	[MEMO ITEM]
Office Sought: House Disburser Senate President	nent For: Primary General Other (specify)		[MEMO ITEM] Memo Entry
State: District:	V 1 17 7/ V		
SUBTOTAL of Disbursements This Page (optional)			0.00

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	DUNT	
Full Name (Last, First, Middle Initial) BUDGET-RENT-A-CAR			Transaction ID: SB21B-2573-80000 Date of Disbursement
Mailing Address 17801 INTERNATIONAL	BLVD		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 7 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
	State Zip Code WA 98158		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental			404.59
Candidate Name		Category/ Type	IMEMO ITEMI
Senate President	ment For: Primary General Other (specify)		[MEMO ITEM] Memo Entry
State: District:			
Full Name (Last, First, Middle Initial) BUDGET-RENT-A-CAR			Transaction ID: SB21B-2573-90000 Date of Disbursement
Mailing Address 4650 GLUMACK			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} $
•	State Zip Code MN 55111		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental			2354.53
Candidate Name		Category/ Type	MEMO ITEM
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		[MEMO ITEM] Memo Entry
State: District:			
Full Name (Last, First, Middle Initial) Budget Rent-A-Car			Transaction ID: SB21B-2573-100000 Date of Disbursement
Mailing Address 11360 W. Airport Service	Road		$\begin{bmatrix} 1 & 2 & M & M & M & M & M & M & M & M & M$
	State Zip Code OH 43558		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental			618.43
Candidate Name		Category/ Type	[MEMO ITEM]
Senate President	ment For: Primary General Other (specify)		Memo Entry
State: District:			
SURTOTAL of Dishursements This Page (ontional)			0.00

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS		OR LINE NUMBER: PAGE 114 / 260 check only one) 21b 22 23 24 25 26 27 28a 28b 28c 29 30b
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam		person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	TRAVEL OFFSET ACCOUNT	
Full Name (Last, First, Middle Initial) BUDGET-RENT-A-CAR	OF ADM	Transaction ID: SB21B-2573-110000 Date of Disbursement  1 2 0 7 2 0 1 0
Mailing Address 1823 JEFFERSON PLA		
City WASHINGTON	State Zip Code DC 20036	Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental		735.02
Candidate Name	Cate Ty	gory/ pe
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)	[MEMO ITEM]  Memo Entry
Full Name (Last, First, Middle Initial)		Transaction ID: SB21B-2573-120000
Budget Rent-A-Car		Date of Disbursement
Mailing Address 240 Airport Road, #106		12 M / D 0 7 / Y 2 0 1 0 Y
City White Plains	State Zip Code NY 10601	Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental		486.02
Candidate Name	Cate Ty	- ·
Senate President	ement For:  Primary General  Other (specify)	Memo Entry
State: District: Full Name (Last, First, Middle Initial)		Turner 10 CD01D 0570 100000
Budget Rent-A-Car Tolls		Transaction ID: SB21B-2573-130000 Date of Disbursement
Mailing Address 11 Grace Avenue, Suite	108	12 M / D 0 7 / Y 2 0 1 0 Y
City Great Neck	State Zip Code NY 11021	Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental		163.35
Candidate Name	Cate Ty	
Office Sought: House Disburse Senate President	ement For:  Primary General  Other (specify)	[MEMO ITEM]  Memo Entry
State: District:		
SUBTOTAL of Disbursements This Page (optional)		0.00

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	NUMBER: PAGE 115 / 260
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCC	DUNT	
Full Name (Last, First, Middle Initial) Continental Airlines			Transaction ID: SB21B-2573-140000 Date of Disbursement
Mailing Address 1600 Smith Street			$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 1 & 2 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
•	State Zip Code TX 77002		Amount of Each Disbursement this Period
Purpose of Disbursement Airfare		0 0	3462.25
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)	,,	[MEMO ITEM] Memo Entry
State: District:			
Full Name (Last, First, Middle Initial) CROWNE PLAZA HOTEL			Transaction ID: SB21B-2573-150000 Date of Disbursement
Mailing Address 733 West Madison			$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 1 & 2 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
,	State Zip Code IL 60661		Amount of Each Disbursement this Period
Purpose of Disbursement Lodging & Catering		•	2340.15
Candidate Name		Category/ Type	[MEMO ITEM]
Senate President	ment For: Primary General Other (specify) ▼		Memo Entry
State: District: Full Name (Last, First, Middle Initial)			T
CROWN PLAZA HOTEL			Transaction ID: SB21B-2573-160000 Date of Disbursement
Mailing Address 1450 GLENARM PLACE			$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 1 & 2 & M \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y & D \\ Y & Z & D & Y & D \end{smallmatrix} \end{bmatrix} $
	State Zip Code CO 80202		Amount of Each Disbursement this Period
Purpose of Disbursement Lodging & Catering		•	6005.96
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		[MEMO ITEM] Memo Entry
State: District:	Other (Specify) ♥		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	0.00

	SCHEDULE B (FEC Form 3X)  Use separate schedule				FOR LINI			IE NUMBER: PAGE 116 / 260 nly one)									
11			each category of the ailed Summary Page			21b 27	22 28a	F	23 28b	F	24 280	F	25 29	20			
	y Information copied from such Reports for commercial purposes, other than usir																
$\rangle$	NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COM	MITTEE -	TRAVEL	. OFFSET ACC	OU	NT											
	Full Name (Last, First, Middle Initial) Delta Air Lines, Inc.							Date	of D	isbur	sei	ment			70000		
	Mailing Address 1030 Delta Bou	levard						1 1 2	2 M		0	7		ž o ť	0 '		
	City Atlanta		State GA	Zip Code 30320				Amo	ount o	of Eac	h I	Disburs					
	Purpose of Disbursement Airfare				Γ	*							136	87.5	1		
	Candidate Name					ateg Typ	-										
	Office Sought: House Senate President	Disburse	ment For: Primary Other (sp	General ecify)					Memo ITEM] Memo Entry								
	State: District:  Full Name (Last, First, Middle Initial)							Tran	eact	ion II	<u>.</u>	SR21	R-2	573-1	80000		
	Doubletree Hotel Downtown									isbur	sei	ment					
	Mailing Address 700 N. King Str	eet						1 1 2	2 "		0	7		ž 0 Ť	0 '		
	City Wilmington		State DE	Zip Code 19801				Amo	ount o	of Eac	h I	Disburs	emei	nt this	Period		
	Purpose of Disbursement Lodging & Catering				Г								7	154.5	0		
	Candidate Name					ateg Typ	-	IME	MO.	ITEM	.,						
	Office Sought: House Senate President	Disburse	ment For: Primary Other (sp	General ecify) ▼				Men			',						
	State: District: Full Name (Last, First, Middle Initial) Doubletree Hotel							1		ion II			B-2	573-1	90000		
	Mailing Address 611 W. Wiscon	sin Avenu	ie					1 2	2 M	/ D	0	7 /	Y	2 0 1	0 <sup>Y</sup>		
	City Milwaukee		State WI	Zip Code 53203				Amo	ount o	of Eac	h I	Disburs	emei	nt this	Period		
	Purpose of Disbursement Lodging & Catering				Γ	v							30	)35.3	6		
	Candidate Name					ateg Typ											
	Office Sought: House Senate President	Disburse	ment For: Primary Other (sp	General ecify) ▼		712		Men			1]						
	State: District:		( <b>5</b> p	J/ <del>V</del>													

S	CHEDULE B (FEC Form 3X)	Use separate schedule(s)	-	R LINE NUMBER: PAGE			117/	260
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check onl	22 28a	23 28b	24 28c	25 29	26 30t
	ny Information copied from such Reports and Statem for commercial purposes, other than using the name							
	NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -							
<u>г</u> А.	Full Name (Last, First, Middle Initial) EMBASSY SUITES				ion ID: (	SB21B-25	573-20	00000
	Mailing Address 319 SW Pine Street			12	0 7	/	010	Y
	PÓRTLAND	State Zip Code OR 97204		Amount o	of Each Di	sbursemer		-
	Purpose of Disbursement Lodging & Catering Candidate Name		ategory/	L		128	35.88	
		ement For:	Type	[MEMO	-			
	Senate President State: District:	Primary General Other (specify)		Memo E	ntry			
В.	Full Name (Last, First, Middle Initial) Enterprise Rent A Car			Date of D	isbursem			
	Mailing Address PO Box 795153			12	0 7	7 2	010	Y
	,	State Zip Code MO 63179		Amount o	of Each Di	sbursemer		
	Purpose of Disbursement Car Rental Candidate Name					98	00.68	
		ement For:	ategory/ Type	[MEMO	-			
	Senate President State: District:	Primary General Other (specify)		Memo E	ntry			
С.	Full Name (Last, First, Middle Initial) Fairfield Inn			Date of D	isbursem			
	Mailing Address 860 South Porter Street			12	07	)	010	Y
	Manchester	State Zip Code NH 03103		Amount o	of Each Di	sbursemer		
	Purpose of Disbursement Lodging & Catering Candidate Name		ategory/ Type			13	56.25	
	Senate President	ement For: Primary General Other (specify)		Memo E	-			
Г	State: District:					• • •	0.00	
	SUBTOTAL of Disbursements This Page (optional)		 <u> </u>	<u></u>	-		0.00	
1	<b>OTAL</b> This Period (last page this line number only)		 •					

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SCHEDULE B (FEC Form 3X)	Lico concreto cobodula/a	FOR LINE	NUMBER: PAGE 118/260
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statemer or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2573-230000
Fairfield Inn by Marriott			Date of Disbursement
Mailing Address 11929 NE Airport Way			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 7 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & 1 & 0 \\ Y & 2 & 0 & 1 & 0 \end{bmatrix} $
	State Zip Code OR 97220		Amount of Each Disbursement this Period
Purpose of Disbursement Lodging & Catering			1246.00
Candidate Name		Category/ Type	
Office Sought: House Disburser		71	[MEMO ITEM] Memo Entry
Senate   President	Primary General Other (specify) ▼		
State: District:	• Carlos (opcony)		
Full Name (Last, First, Middle Initial) FONTAINEBLEAU RESORT			Transaction ID: SB21B-2573-240000
FONTAINEBLEAU RESORT			Date of Disbursement
Mailing Address 4441 COLLINS AVE			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} $
•	State Zip Code FL 33140		Amount of Each Disbursement this Period
Purpose of Disbursement			11111.00
Lodging & Catering  Candidate Name		Category/	
		Туре	[MEMO ITEM]
Office Sought: House Disburser Senate	ment For:  Primary General		Memo Entry
President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Frontier Airlines			Transaction ID: SB21B-2573-250000 Date of Disbursement
Mailing Address Frontier Center One 7001 Tower Road			$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 1 & 2 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} Y$
	State Zip Code CO 80249		Amount of Each Disbursement this Period
Purpose of Disbursement Airfare		•	599.40
Candidate Name		Category/ Type	MENO ITEM
Office Sought: House Disburser			[MEMO ITEM] Memo Entry
Senate   President	Primary General Other (specify) ▼		
State: District:	- \-i- \-i- \-i- \-		
SURTOTAL of Disbursements This Page (ontinnal)			0.00

S	CHEDULE B (FEC Form 3X)	Use sep	arate schedule(s)						GE	119 /	260			
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	y Information copied from such Reports and State													
01	for commercial purposes, other than using the na  NAME OF COMMITTEE (In Full)	nie and addre	ss of any political	COII	IIIIII	ee to so	iicit conti	ibut	10115 11	TOITI :	Sucirio	OHIII	iiillee	
$\rangle$	DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL	OFFSET ACC	OU	NT									
٩.	Full Name (Last, First, Middle Initial) GRAND SIERRA RESORT						Date	of D	isburs	eme		3-25	73-26	50000
	Mailing Address 2500 E SECOND ST.						<sup>M</sup> 2	М	/ D	07	/ [	ž	0 1 0	Y
	City RENO	State NV	Zip Code 89595				Amou	ınt o	f Each	n Dis	sburse		t this F	-
	Purpose of Disbursement Lodging & Catering			Г	U			-	-			56	63.25	
	Candidate Name				atego Type									
	Senate President	sement For: Primary Other (spe	General ecify) ▼		Турс	<del>-</del>	[MEM			]				
_	State: District:													
В.	Full Name (Last, First, Middle Initial) Hertz Car Rental						Date	of D	isburs	eme				70000
	Mailing Address 3311 Airport Road						<sup>M</sup> 2	М	/ D	07		ž	0 1 0	Y
	City Allentown	State PA	Zip Code 18101				Amount of Each Disbursement				Period			
	Purpose of Disbursement Car Rental							•	-	0		9	45.31	
	Candidate Name				atego Type									
	Office Sought:  House Senate President State:  Disbur	sement For: Primary Other (spe	General ecify) ▼				[MEM			J				
 C.	Full Name (Last, First, Middle Initial) Hertz Rent-A-Car						Date	of D				3-25	573-28	30000
	Mailing Address Boston Logan Intl Airpo 207 Porter Street	ort					<sup>M</sup> 2	М	/ D	07	/ \	ž	0 1 0	Y
	City Boston	State MA	Zip Code 02128				Amou	ınt o	f Each	n Dis	burse	men	t this F	Period
	Purpose of Disbursement Car Rental			Г			L.					13	91.43	
	Candidate Name				atego Type		[MEMO ITEM]							
	Senate President	sement For: Primary Other (spe	General ecify) ▼				Memo			1				
Г	State: District:									_				
s	SUBTOTAL of Disbursements This Page (optional	l)							_				0.00	
Т	OTAL This Period (last page this line number onl	y)				•								

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only X 21b 27	NUMBER: PAGE 120 / 260 / one)  22
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACCO	DUNT	
Full Name (Last, First, Middle Initial) HERTZ RENT A CAR			Transaction ID: SB21B-2573-290000 Date of Disbursement
Mailing Address Taylor Memorial Dr			12 M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City BURLINGTON	State Zip Code VT 05403		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental			1467.75
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		[MEMO ITEM] Memo Entry
State: District:			
Full Name (Last, First, Middle Initial) Hertz Car Rental			Transaction ID: SB21B-2573-300000 Date of Disbursement
Mailing Address 10000 Bessie Coleman	Drive		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 7 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Chicago	State Zip Code IL 60666		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental			6030.15
Candidate Name		Category/ Type	[MEMO ITEM]
Senate President	ement For: Primary General Other (specify)		Memo Entry
State: District:			
Full Name (Last, First, Middle Initial) Hertz Car Rental			Transaction ID: SB21B-2573-310000 Date of Disbursement
Mailing Address Cleveland Hopkins Airpo 19601 Maplewood Avenu			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 12 \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 \end{smallmatrix} \ \ \ \ \end{bmatrix} \ \ \ \ \ \ \ \ \ \ \ \ \ \$
City Cleveland	State Zip Code OH 44135		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental			3606.58
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)	71: -	[MEMO ITEM] Memo Entry
State: District:	□ Carlot (opcony) ▼		
SUBTOTAL of Disbursements This Page (optional)			0.00

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

	ITEMIZED DISBURSEMENTS for e							NE N	IUMBE	R:		P	AGE	121	/ 260	
11	EMIZED DI	<b>SBUKSEMEN</b>	115		I Summary Page		X	21b 27		22 28a		23 28b	24 28c	F	25 29	$\square$
		ed from such Reports rposes, other than us														S
$\setminus$	NAME OF COM	MITTEE (In Full)														
	DEMOCRATION	C NATIONAL CON	MITTEE -	TRAVEL	OFFSET ACC	OU	NT									
	Full Name (Last, Hertz Car Ren	First, Middle Initial) tal										ion ID:	SB21 ement	B-2	573-3	2000
	Mailing Address	Detroit Metro V 289 Lucas Driv		Airprt						<sup>M</sup> 2	М	<sup>/</sup> DC	7 /	Y 2	010	O Y
	City Detroit	200 2000 211		State MI	Zip Code 48482					Amou	int o	f Each	Disburs	emer	nt this	Period
	Purpose of Disbursement Car Rental									L.				.4	61.40	5
	Candidate Name	,					atego Type					<b>T</b> E 841				
	Office Sought:	House Senate President	Disburse	ment For: Primary Other (sp	General pecify) ▼					[MEM Memo		_				
	State:	District:														
	Full Name (Last, First, Middle Initial) Hertz Car Rental									Date	of D	isburs				
	Mailing Address	Las Vegas Mc 7135 Gilespie	Carran Intl Street	Airprt						1 <sup>M</sup> 2	М	/ DC	7 /	Ý	0 1 (	) Y
	City Las Vegas		(	State NV	Zip Code 89119					Amou	int o	f Each	Disburs	-		
	Purpose of Disb Car Rental		Γ				L.	-		<u> </u>	3	07.04	1			
	Candidate Name			С	atego Type	-		IMEMO ITEMI								
	Office Sought:	House Senate President	Disburse	ment For: Primary Other (sp	General pecify)					[MEMO ITEM] Memo Entry						
_	State:	District:														
	Full Name (Last, Hertz Car Ren	First, Middle Initial) tal										ion ID: isburs	SB21 ement	B-2	573-3	4000
	Mailing Address	438 South Wil	low							<sup>M</sup> 2	М	<sup>′</sup> DC	7 /	2	010	O Y
	City Manchester									Amou	int o	f Each	Disburs	emer	nt this	Period
	Car Rental	Purpose of Disbursement								L.	-	-		14	52.76	5
	Candidate Name									─ [MEMO ITEM]						
	Office Sought:	House Senate President	Disburse	ment For: Primary Other (sp	General pecify) ▼					Memo		_				
	State:	District:		- \-	<i>,</i> , <del>↓</del>											

			parate schedule(s)	e(s)   (check			INE NUMBER: PAGE 122 / 260 only one)									
H	EMIZED DI	<b>PROKZEWE</b>	115		n category of the I Summary Page		X	21k		22 28a		23 28b	24 28c		25 29	2 3
		ed from such Reports rposes, other than us														S
Ν		MITTEE (In Full)														
$\mathbb{Z}$	DEMOCRATION	C NATIONAL CON	MITTEE -	TRAVEL	OFFSET ACC	OU	NT									
	Full Name (Last, Hertz Car Ren	First, Middle Initial) tal										ion ID isburs	: SB21 ement	B-2	573-3	50000
	Mailing Address	323 West 34th	Street							$\begin{array}{c ccccccccccccccccccccccccccccccccccc$						
	City New York			State NY	Zip Code 10119					Amou	int o	f Each	Disburs	emer	nt this	Period
	Purpose of Disbr Car Rental	Purpose of Disbursement Car Rental												2	235.45	5
	Candidate Name						atego Type					T-141				
	Office Sought:	House Senate President	Disburse	ment For: Primary Other (sp	General pecify) ▼					Memo						
_	State:	District:														
	Full Name (Last, First, Middle Initial) Hertz Car Rental									Date	of D	isburs				
	Mailing Address	Mailing Address 5300 South Howell Avenue									М	/ D	7 /	Y 2	2 0 1 (	o <sup>Y</sup>
	City Milwaukee			State WI	Zip Code 53207					Amou	int o	f Each	Disburs	emer	nt this	Period
	Purpose of Disbursement Car Rental							•	1	1583.21				1		
	Candidate Name					С	atego Type	-		[MEMO ITEM]						
	Office Sought:	House Senate President	Disburse	ment For: Primary Other (sp	General ecify)					Memo						
	State:	District:														
	Full Name (Last, Hertz Car Ren	First, Middle Initial) tal										ion ID isburs	: SB21 ement	B-2	573-3	70000
	Mailing Address	4128 Airport F	Road							1 <sup>M</sup> 2	М	/ D	7 /	Y	2 0 1 (	O Y
	City State Zip Code Moline IL 61265									Amou	int o	f Each	Disburs	emer	nt this	Period
	Car Rental	Purpose of Disbursement Car Rental								L.	-			. 8	315.32	2
	Candidate Name	Candidate Name								[MEMO ITEM]						
	Office Sought:	House Senate President	Disburse	ment For: Primary Other (sp	General pecify) ▼					Memo		-				
	State:	District:		(3)	<i>→</i> , <b>▼</b>											

<u> </u>	CHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 123 / 260
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check onlock 21b 27	y one) 22
	y Information copied from such Reports and State for commercial purposes, other than using the nan		by any person	for the purpose of soliciting contributions
$\rangle$	NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACC	OUNT	
	Full Name (Last, First, Middle Initial) HERTZ CAR RENTAL			Transaction ID: SB21B-2573-380000 Date of Disbursement
	Mailing Address Newark Intl Airport 23 Newark Airport, Bldg	23		12 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City NEWARK	State Zip Code NJ 07114		Amount of Each Disbursement this Period
	Purpose of Disbursement Car Rental			251.69
	Candidate Name		Category/ Type	
	Office Sought: House Disburs Senate President	ement For:  Primary  General  Other (specify)	,,	[MEMO ITEM] Memo Entry
_	State: District:			
	Full Name (Last, First, Middle Initial) Hertz Car Rental			Transaction ID: SB21B-2573-390000 Date of Disbursement
	Mailing Address 2951 Market St			12 M / D D 7 / Y 2 0 1 0 Y
	City Philadelphia	State Zip Code PA 19104		Amount of Each Disbursement this Period
	Purpose of Disbursement Car Rental			3261.68
	Candidate Name		Category/ Type	IMEMO ITEMI
	Senate President	ement For: Primary General Other (specify)		[MEMO ITEM] Memo Entry
	State: District: Full Name (Last, First, Middle Initial)			
	Hertz Car Rental			Transaction ID: SB21B-2573-400000 Date of Disbursement
	Mailing Address 7000 Northeast Airport	Vay		12 M / D D / Y Y Y O Y O Y
	City Portland	State Zip Code OR 97220		Amount of Each Disbursement this Period
	Purpose of Disbursement Car Rental		478.55	
	Candidate Name	Category/ Type		
	Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)	. ,,,,,	[MEMO ITEM] Memo Entry
	State: District:	- · · · · · · · · · · · · · · · · · · ·		

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 124 / 260
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	7 (olife) 22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)  DEMOCRATIC NATIONAL COMMITTEE			
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2573-410000
Hertz Car Rental			Date of Disbursement
Mailing Address 1567 Vassar Street			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 0 & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} Y$
City Reno	State Zip Code NV 89502		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental	05502		626.74
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President	ement For:  Primary General  Other (specify)	туре	[MEMO ITEM] Memo Entry
State: District:			
Full Name (Last, First, Middle Initial) Hertz Car Rental			Transaction ID: SB21B-2573-420000 Date of Disbursement
Mailing Address 780 McDonnell Road			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City San Francisco	State Zip Code CA 94128		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental		· · · ·	1619.67
Candidate Name		Category/ Type	IMEMO ITEMI
Office Sought: House Disburs Senate President	ement For:  Primary General  Other (specify)		[MEMO ITEM] Memo Entry
State: District:			
Full Name (Last, First, Middle Initial) Hertz Car Rental			Transaction ID: SB21B-2573-430000 Date of Disbursement
Mailing Address 780 McDonnell Road			$\begin{bmatrix} M & M \\ 12 & M \end{bmatrix} / \begin{bmatrix} D & D \\ 07 & 7 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2010 \end{bmatrix} $
City San Francisco	State Zip Code CA 94128		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental		· · ·	6481.84
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President	ement For:    Primary   General     Other (specify)   ▼	Туре	[MEMO ITEM] Memo Entry
State: District:	- \-r J/ \\		
SUBTOTAL of Disbursements This Page (optional)			0.00

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	-	NUMBER: PAGE 125 / 260
ITEMIZED DISBURSEMENTS	for each category of the	(check only	
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statemor for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) Hertz Car Rental			<b>Transaction ID:</b> SB21B-2573-440000 Date of Disbursement
Mailing Address Toledo Express Airport 11013 Airport Highway			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 7 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City	State Zip Code OH 43558		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental		-	299.61
Candidate Name		Category/ Type	
Office Sought: House Disburser	ment For:	туре	[MEMO_ITEM]
Senate President	Primary General Other (specify) ▼		Memo Entry
State: District:			
Full Name (Last, First, Middle Initial) Hertz Car Rental			<b>Transaction ID:</b> SB21B-2573-450000 Date of Disbursement
Mailing Address 100 Martin Luther King Bl	lvd.		$\begin{bmatrix} M & M & M \\ 1 & 2 & M \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ 0 & 7 \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
•	State Zip Code DE 19801		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental	10001		1082.37
Candidate Name		Category/ Type	IMEMO ITEMI
Office Sought: House Disburser Senate President	ment For: Primary General Other (specify) ▼		[MEMO ITEM] Memo Entry
State: District:			
Full Name (Last, First, Middle Initial) Hilton New York			Transaction ID: SB21B-2573-460000 Date of Disbursement
Mailing Address 1335 Avenue of the Amer	ricas		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 12 \end{smallmatrix} & \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 \end{smallmatrix} & \begin{bmatrix} T & Y & Y & Y & Y \\ 20 \end{smallmatrix} & \begin{smallmatrix} T & Y \\ 10 \end{smallmatrix} \end{bmatrix}$
	State Zip Code NY 10019		Amount of Each Disbursement this Period
Purpose of Disbursement Lodging & Catering			23.25
Candidate Name		Category/ Type	
Office Sought: House Disburser Senate President	ment For: Primary General Other (specify)	,,	[MEMO ITEM] Memo Entry
State: District:	Oniei (Specily)		
SUBTOTAL of Disbursements This Page (optional)			0.00

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

	SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS		arate schedule(s)		_	R LINE	NUMBE y one)	R:		F	AGE	126	26 / 260	
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	NAME OF COMMITTEE (In Full)  DEMOCRATIC NATIONAL COMMITTEE						SHOIL GOILL			5111 5001	0011			
A.	Full Name (Last, First, Middle Initial) HOMEWOOD SUITES						Transaction ID: SB21B-2573-470000 Date of Disbursement  1 2 0 7 2 0 1 0							)0
	Mailing Address 350 ROCKY RUN BLVD						1 2			,				
	City WILMINGTON	State DE	Zip Code 19803				Amou	ınt c	f Each	Disburs				t
	Purpose of Disbursement Lodging & Catering Candidate Name	on./						218.00	,	_				
		ement For:			ateg Typ	-	[MEM	10	ITEM]					
	Senate President	Primary Other (spe	General <b>▼</b>				Memo Entry							
_	State: District:													
В.	Full Name (Last, First, Middle Initial) Hotel Indigo			Date		isburse					)0			
	Mailing Address 1244 N. Dearborn Parkw		Amount of Each Disbursement this Period											
	City Chicago	State Zip Code IL 60610								Disburs				t
	Purpose of Disbursement Lodging & Catering		•		13314.00				314.00	6	_			
	Candidate Name  Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General		ateg Typ		- [MEMO ITEM] Memo Entry							
_	State: District:													
C.	Full Name (Last, First, Middle Initial)  Hotel Ivy	Full Name (Last, First, Middle Initial) Hotel Ivy										573-4		)0
	Mailing Address 2001 South Eleventh Str		12	М	<sup>′</sup> 0	7 /		ž 0 1 (	י נ					
	City Minneapolis	State MN	Zip Code 55403				Amou	ınt c	f Each	Disburs	-			k
	Purpose of Disbursement Lodging & Catering						L.				2	104.44	1	_
	Candidate Name	Category/ Type												
	Senate President	ement For: Primary Other (spe	General <b>▼</b>				[MEMO ITEM] Memo Entry							
Г	State: District:						_	_						_
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	ny Information copied from such Reports and S for commercial purposes, other than using the				
	NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITT	EE - TRAVEL	OFFSET ACCC	UNT	
·	Full Name (Last, First, Middle Initial) Hyatt Regency San Francisco Arpt				Transaction ID: SB21B-2573-500000 Date of Disbursement
	Mailing Address 1333 Bayshore High	way			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Burlingame	State CA	Zip Code 94010		Amount of Each Disbursement this Period
	Purpose of Disbursement Lodging & Catering				977.68
	Candidate Name			Category/ Type	
	Senate President	bursement For: Primary Other (spe	General ecify) ▼	,	[MEMO ITEM] Memo Entry
_	State: District:  Full Name (Last, First, Middle Initial)				Transaction ID: SB21B-2573-510000
	Richmond Upon Thames				Date of Disbursement
	Mailing Address 44 York Street Twickenham				1 2 M / D D D / Y Y Y O Y O Y
	City Middlesex	State	Zip Code TW1 3-BZ		Amount of Each Disbursement this Period
	Purpose of Disbursement Travel Agent fee	•	56.49		
	Candidate Name			Category/ Type	[MEMO ITEM]
	Office Sought: House District: District:	bursement For: Primary Other (spe	General ecify) ▼		Memo Entry
	Full Name (Last, First, Middle Initial) Crowne Plaza Hotel				Transaction ID: SB21B-2573-520000 Date of Disbursement
	Mailing Address 2 Somerset Parkway	/			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Nashua	State NH	Zip Code 03063		Amount of Each Disbursement this Period
	Purpose of Disbursement Lodging & Catering				1992.00
	Candidate Name	Category/ Type			
	Office Sought: House Dis Senate President	bursement For: Primary Other (spe	General ecify) ▼	.,	[MEMO ITEM] Memo Entry
	State: District:	(-)	•		

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee  NAME OF COMMITTEE (In Full)  DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT	SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS		·		arate schedule(s)					R:	NE NUMBER: PAGE 128 / 260 only one)								
NAME OF COMMITTEE (In Full)  DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT  Full Name (Last, First, Middle Initial) Holiday Inn Express  Mailing Address 2080 Holliday Drive  City State Zip Code IA 52002 Purpose of Disbursement Lodging & Catering Candidate Name  Office Sought: House Senate President Senate VI Salate Zip Code Milwaukee WI 53207  Purpose of Disbursement Lodging & Catering Candidate Name  Office Sought: House Senate VI Salate Zip Code Disbursement Lodging & Catering Candidate Name  Office Sought: Full Name (Last, First, Middle Initial) Holiday Inn Hotel & Suites  Mailing Address 545 West Layton Avenue  Transaction ID: SB218-2573-540000 Date of Disbursement Ibis Period  MEMO ITEM]  MEMO ITEM] Memo Entry  MEMO ITEM]  Mem	II ENIIZED D	IOBUKOEMEN I S	>				Ò	21b	22		l		┙			26			
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT  Full Name (Last, First, Middle Initial) Holiday Inn Express  Mailing Address 2080 Holliday Drive  City Dubburge Purpose of Disbursement Lodging & Catering Candidate Name  Office Sought: House President District:  Full Name (Last, First, Middle Initial) Holiday Inn Hotel & Suites Mailing Address District:  Full Name (Last, First, Middle Initial) Holiday Inn Hotel & Suites Mailing Address District:  Full Name (Last, First, Middle Initial) Holiday Inn Hotel & Suites Mailing Address Disbursement City Milwaukee  Wi 53207  Purpose of Disbursement Lodging & Catering Candidate Name  Office Sought:  Full Name (Last, First, Middle Initial) Holiday Inn Hotel & Suites District:  Full Name (Last, First, Middle Initial) Holiday Inn Hotel & Suites District:  Full Name (Last, First, Middle Initial) InterContinental Chicago  Mailing Address Sonate President Disbursement For: Other (specify) ▼  Transaction ID: SB21B-2573-540000 Date of Disbursement this Period  Memo Entry  Memo Entry  InterContinental Chicago  Mailing Address Sot Shorth Michigan Ave  City Chicago  City Chicago Candidate Name  Other (specify) ▼  Other (specify) ▼  InterContinental Chicago  Mailing Address Sot Shorth Michigan Ave  City Chicago Cardidate Name  City Chicago Cardidate Name  Other (specify) ▼  InterContinental Chicago  Mailing Address Sot Shorth Michigan Ave  City Chicago Cardidate Name  City Chicago Cardidate Name  Disbursement For: Purpose of Disbursement Category/ Type  InterContinental Chicago  Mailing Address Sot Shorth Michigan Ave  City Chicago Cardidate Name  Disbursement For: Purpose of Disbursement Category/ Type  InterContinental Chicago  Mailing Address Sot Shorth Michigan Ave  City Chicago Cardidate Name  Disbursement For: Purpose of Disbursement Category/ Type  InterContinental Chicago  Mailing Address Sot Shorth Michigan  Amount of Each Disbursement this Period  Amount of Each Disbursement this Period  Category/ Y Z 0 1 0 Y  Z 0 1 0 Y  Z 0 1 0 Y  Z 0 1 0 Y  Z 0 1 0 Y  Z 0 1 0 Y  Z																5			
Holiday Inn Express  Mailing Address 2080 Holliday Drive  City	1 \	, ,	TTEE - T	RAVEL	OFFSET ACC	OU	NT												
City Dubursement Lodging & Catering Cardidate Name  Office Sought: House President Primary General Purpose of Disbursement Lodging & Catering Caldidate Name  Office Sought: House Primary General Primary General Primary General Purpose of Disbursement For:  Full Name (Last, First, Middle Initial) Holiday Inn Hotel & Suites  Mailing Address 545 West Layton Avenue  City State Zip Code WI 53207  Office Sought: House Primary General Primary General Primary General Primary General Primary General Primary General Type  Office Sought: House Senate Primary General Primary General Type  Office Sought: House Senate Primary General Primary General Primary General Type  Mailing Address 505 North Michigan Ave  City State Zip Code IL 60611  Purpose of Disbursement Lodging & Catering  Category/ Type  Office Sought: House State Zip Code IL 60611  Purpose of Disbursement Lodging & Catering  Candidate Name  City State Zip Code IL 60611  Purpose of Disbursement Lodging & Catering  Candidate Name  Disbursement Lodging & Catering  Category/ Type  Office Sought: House Primary General Primary General Purpose of Disbursement Into Sazi President Into Sa																			
Dibuque IA 52002  Purpose of Disbursement Lodging & Catering  Candidate Name  Office Sought: House Senate President Disbursement For: General President State: District:  Full Name (Last, First, Middle Initial) Holiday Inn Hotel & Suites  Mailing Address 545 West Layton Avenue  City State Zip Code Milwaukkee WI 53207  Purpose of Disbursement Lodging & Catering Candidate Name  Office Sought: House Senate Primary General Disbursement For: Senate District:  Full Name (Last, First, Middle Initial) House Senate Disbursement For: Senate Primary General Disbursement InterContinental Chicago  Mailing Address 505 North Michigan Ave  City State Zip Code Content Content (specify) ▼  Transaction ID: SB21B-2573-540000 Date of Disbursement this Period Category' Type  [MEMO ITEM] Memo Entry  Transaction ID: SB21B-2573-550000 Date of Disbursement InterContinental Chicago IL Go6611  Purpose of Disbursement Lodging & Catering Category' Type  Office Sought: House Disbursement For: Category' Type  Office S	Mailing Address	2080 Holliday Driv	ve						12			0 7		2	010	)			
Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  Transaction ID: SB21B-2573-540000 Date of Disbursement In State: District:  Full Name (Last, First, Middle Initial) Holiday Inn Hotel & Suites  Mailing Address 545 West Layton Avenue  City State Zip Code Milwaukee WI 53207  Purpose of Disbursement Lodging & Catering Candidate Name  Office Sought: House President Other (specify) ▼  IMEMO ITEM] Memo Entry  Memo Entry  Memo Interviolation ID: SB21B-2573-540000 Date of Disbursement In Interviolation ID: SB21B-2573-550000 Date of Disbursement Interviolation ID: SB21B-2573-5500000 Date of Disbursement Interviolation ID: SB21B-2573-550000 Date of Disbursement Interviolation ID: SB2				•					Amo	unt c	f Eacl	n Di	sburse	men	t this I	Period			
Office Sought:						Γ	•		L.	_				22	46.76	5			
Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) Holiday Inn Hotel & Suites  Mailing Address 545 West Layton Avenue  City State Zip Code Milwaukee WI 53207  Purpose of Disbursement Lodging & Catering Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Office Sought: Full Name (Last, First, Middle Initial) InterContinental Chicago  Mailing Address 545 West Layton Avenue  Transaction ID: SB21B-2573-540000 Date of Disbursement this Period  Amount of Each Disbursement this Period  [MEMO ITEM] Memo Entry  [MEMO ITEM] Memo Entry  Transaction ID: SB21B-2573-550000 Date of Disbursement InterContinental Chicago  Mailing Address 505 North Michigan Ave  City State Zip Code IL 60611  Purpose of Disbursement Lodging & Catering  Candidate Name  Office Sought: House Senate Primary General Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼	Candidate Nam	е					_	-				_							
Full Name (Last, First, Middle Initial) Holiday Inn Hotel & Suites  Mailing Address 545 West Layton Avenue  City Milwaukee  Purpose of Disbursement Lodging & Catering Candidate Name  Office Sought:  Full Name (Last, First, Middle Initial) InterContinental Chicago  Mailing Address 505 North Michigan Ave  City  State  City State  State  District:  Full Name (Last, First, Middle Initial) InterContinental Chicago  Mailing Address  So5 North Michigan Ave  City Chicago  Purpose of Disbursement  Lodging & Catering  Candidate Name  District:  Full Name (Last, First, Middle Initial) InterContinental Chicago  Mailing Address  So5 North Michigan Ave  City Chicago  Purpose of Disbursement Lodging & Catering  Candidate Name  Disbursement  Mailing Address  So5 North Michigan Ave  City Chicago  Purpose of Disbursement Lodging & Catering  Candidate Name  Disbursement  Memo Entry		Senate President	P	Primary								]							
Mailing Address 545 West Layton Avenue    T2	Full Name (Las	Full Name (Last, First, Middle Initial)									ion ID	): ;	SB21I	3-25	573-5	40000			
City State Zip Code WI 53207  Purpose of Disbursement Lodging & Catering Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  City State Zip Code (State Zip Code (Specify) ▼  City State Zip Code (Chicago IL 60611  Purpose of Disbursement Lodging & Catering (Category/ Type)  City State Zip Code (Chicago IL 60611  Purpose of Disbursement Lodging & Catering (Category/ Type)  City State Zip Code (Chicago IL 60611  Purpose of Disbursement Lodging & Catering (Category/ Type)  City State Zip Code (Chicago IL 60611  Purpose of Disbursement Lodging & Catering (Category/ Type)  City State Zip Code (Chicago IL 60611  Purpose of Disbursement Lodging & Catering (Category/ Type)  Condidate Name (Category/ Type)  City State Zip Code (Chicago IL 60611)  Code (Chicago IL 60611)  Category/ Type (MEMO ITEM)  Memo Entry (MEMO ITEM)  Memo Entry									M					, Y	010	Y			
Milwaukee WI 53207  Purpose of Disbursement Lodging & Catering  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) InterContinental Chicago  Mailing Address 505 North Michigan Ave  City Chicago IL 60611  Purpose of Disbursement Lodging & Catering  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Image: Category Amount of Each Disbursement this Period Category Type  Office Sought: House Senate Primary General Other (specify) ▼  Office Sought: Primary General Other (specify) ▼  Image: Category Amount of Each Disbursement this Period Senate Primary General Other (specify) ▼  Image: Category Amount of Each Disbursement this Period Senate Primary General Other (specify) ▼		5 545 West Layton																	
Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) InterContinental Chicago  Mailing Address 505 North Michigan Ave  City State Zip Code Chicago IL 606611  Purpose of Disbursement Lodging & Catering Candidate Name  Office Sought: House Senate Primary General Disbursement For:  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Disbursement For:  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Disbursement For:	,								Amo	unt c	of Eacl	n Di	sburse						
Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) InterContinental Chicago  Mailing Address 505 North Michigan Ave  City State Zip Code Chicago IL 60611  Purpose of Disbursement Lodging & Catering Candidate Name  Office Sought: House Senate President Disbursement For: Senate President Other (specify) ▼  Office Sought: House Senate President Other (specify) ▼  IMEMO ITEM]  Memo Entry  Memo Entry  IMEMO ITEM]  Memo ITEM]  Memo ITEM]  Memo ITEM]  Memo Entry														31	83.24				
State: District:  Full Name (Last, First, Middle Initial) InterContinental Chicago  Mailing Address 505 North Michigan Ave  City Chicago IL  Purpose of Disbursement Lodging & Catering Candidate Name  Office Sought: House Senate Primary Other (specify)  Pirmary General  Memo Entry	Candidate Nam	Candidate Name Category/									[MEMO ITEM]								
Full Name (Last, First, Middle Initial) InterContinental Chicago  Mailing Address 505 North Michigan Ave  City State Zip Code Chicago IL 60611  Purpose of Disbursement Lodging & Catering Candidate Name  Disbursement For: Senate Primary General Other (specify) Total	Office Sought:	Senate President	P	Primary					_			J							
InterContinental Chicago  Mailing Address 505 North Michigan Ave  City State Zip Code Chicago IL 60611  Purpose of Disbursement Lodging & Catering Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  InterContinental Chicago  Date of Disbursement  M 2 M / 0 7 / 2 0 1 0 Y  Y 2									<b>-</b>		ID		00041	2.05	70.5	F0000			
Mailing Address 505 North Michigan Ave  City State Zip Code Chicago IL 60611  Purpose of Disbursement Lodging & Catering Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  I 2 0 7 2 0 1 0  Amount of Each Disbursement this Period Category/ Type  [MEMO ITEM]  Memo Entry									Date	of D	isburs	em	ent						
Chicago IL 60611  Purpose of Disbursement Lodging & Catering Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate Primary General President Other (specify)  Office Sought: Other (specify)	Mailing Address	505 North Michiga	an Ave							М	/	0 7		ž	0 Í (	) <sup>Y</sup>			
Lodging & Catering  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify) ▼  IMEMO ITEM]  Memo Entry									Amo	unt c	f Eacl	n Di	sburse	men	t this I	Period			
Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  Office Sought: Other (specify)						Г	v		L.	-	_			150	03.63	3			
Office Sought: House Disbursement For: Memo ITEM] Senate Primary General Other (specify) ▼		Candidate Name Category/																	
	Office Sought:	Senate	P	Primary															
	State:			(3)	'J) <b>\</b>														

В.

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)			NE NUMBER: PAGE 129 / 260 only one)								
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X	-	22	23 24 28b 28c	25 29						
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NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	COUNT										
Full Name (Last, First, Middle Initial) Philadelphia Marriott Downtown  Mailing Address 1201 Market Street					on ID: SB21	B-2573- , 2 0 1						
	State Zip Code			Amount of	Each Disburse	ement this	s Period					
Philadelphia	PA 19107			7 undant of								
Purpose of Disbursement Lodging & Catering				L		18629.	38					
Candidate Name		Cateo										
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)			Memo En								
Full Name (Last, First, Middle Initial)					on ID: SB21	B-2573-	570000					
MARRIOTT HOTEL				M M /	sbursement	2 0 1	OY					
Mailing Address 1250 JORDAN CREEK F	PKWY.			12	0 7	201	Ü					
•	State Zip Code IA 50266			Amount of	Each Disburse	ement this	s Period					
Purpose of Disbursement Lodging & Catering			•			4336.0	00					
Candidate Name		Cateo Typ		IMENO I	TE 841							
Senate President	ement For: Primary General Other (specify)			Memo En	-							
State: District: Full Name (Last, First, Middle Initial)				Tuenessali	ID- CD01	D 0570						
San Francisco Airport Marriott Waterfront				Date of Dis	on ID: SB21							
Mailing Address 1800 Old Bayshore High	way			12	07	ŹOĬ	0					
•	State Zip Code CA 94010			Amount of	Each Disburse	ement this	s Period					
Purpose of Disbursement			-	<u> </u>		1006.	38					
Lodging & Catering Candidate Name		Categ										
Senate	ement For: Primary General	[MEMO ITEM] Memo Entry										
President   State: District:	Other (specify)											
SUBTOTAL of Disbursements This Page (optional)			<u> </u>			0.0	00					

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only	22 23 24 25 26
Any Information copied from such Reports and State	nante may not be sold or used b	27	28a 28b 28c 29 30b
or for commercial purposes, other than using the nan			
NAME OF COMMITTEE (In Full)			
DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACCO	UNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2573-590000
Cleveland Marriott Key Center			Date of Disbursement
Mailing Address 127 Public Square			12 7 7 7 2 0 1 0 7
City Cleveland	State Zip Code OH 44114		Amount of Each Disbursement this Period
Purpose of Disbursement Lodging & Catering	]		8325.72
Candidate Name	L	Category/	
		Туре	[MEMO ITEM]
Office Sought: House Disburs Senate President	ement For:  Primary  General  Other (specify)		Memo Entry
State: District:			
Full Name (Last, First, Middle Initial) Boston Marriott Quincy			Transaction ID: SB21B-2573-600000 Date of Disbursement
Mailing Address 1000 Marriott Drive			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 7 \end{smallmatrix} ] / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix}$
City Quincy	State Zip Code MA 02169		Amount of Each Disbursement this Period
Purpose of Disbursement Lodging & Catering	[	-	4412.25
Candidate Name		Category/ Type	IMENO ITEM
Senate President	ement For: Primary General Other (specify)		[MEMO ITEM] Memo Entry
State: District: Full Name (Last, First, Middle Initial)			
Stamford Marriott			Transaction ID: SB21B-2573-610000 Date of Disbursement
Mailing Address 243 Tresser Blvd			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} Y$
City Stamford	State Zip Code CT 06901		Amount of Each Disbursement this Period
Purpose of Disbursement Lodging & Catering			2676.00
Candidate Name		Category/ Type	IMEMO ITEMI
Office Sought: House Disburs Senate President	ement For:  Primary  General  Other (specify)		[MEMO ITEM] Memo Entry
State: District:	<u> </u>		
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 131 / 260					
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only						
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Any Information copied from such Reports and Statem or for commercial purposes, other than using the name								
NAME OF COMMITTEE (In Full)								
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT						
Full Name (Last, First, Middle Initial) Trumbull Marriott Merritt Parkway			Transaction ID: SB21B-2573-620000 Date of Disbursement					
Mailing Address 180 Hawley Lane			$\begin{bmatrix}\begin{smallmatrix}M&M&M\\1&2&M\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&D&D\\0&7\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y&Y\\2&0&1&0\end{smallmatrix}\end{bmatrix}$					
City Trumbull	State Zip Code CT 06611		Amount of Each Disbursement this Period					
Purpose of Disbursement Lodging & Catering	00011	0 0	6894.72					
Candidate Name		Category/ Type						
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	Туре	[MEMO ITEM] Memo Entry					
State: District:								
Full Name (Last, First, Middle Initial) Renaissance Chicago Downtown Hotel								
Mailing Address One West Wacker Drive			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 7 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$					
City Chicago	State Zip Code IL 60601		Amount of Each Disbursement this Period					
Purpose of Disbursement		•	7331.19					
Lodging & Catering Candidate Name		Category/ Type						
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	. 100	[MEMO ITEM] Memo Entry					
State: District:	•							
Full Name (Last, First, Middle Initial) RENAISSANCE HOTEL			Transaction ID: SB21B-2573-640000 Date of Disbursement					
Mailing Address 24 Public Sq			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 7 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$					
City CLEVELAND	State Zip Code OH 43215		Amount of Each Disbursement this Period					
Purpose of Disbursement Lodging & Catering		0 0	940.48					
Candidate Name		Category/ Type						
Senate President	ment For: Primary General Other (specify)	21	[MEMO ITEM] Memo Entry					
State: District:								
SUBTOTAL of Disbursements This Page (ontional)			0.00					

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age# 11990120901		
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	for each category of the  Detailed Summary Page  (che	R LINE NUMBER: PAGE 132 / 260 eck only one)  21b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the nam	ents may not be sold or used by any p	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCOUNT	
Full Name (Last, First, Middle Initial) Renaissance Columbus Downtown Hotel		Transaction ID: SB21B-2573-650000 Date of Disbursement
Mailing Address 50 North 3rd Street		12 07 7 2010
City Columbus	State Zip Code OH 43215	Amount of Each Disbursement this Period
Purpose of Disbursement Lodging & Catering Candidate Name		6749.25
	Catego Type ment For: Primary General Other (specify) ▼	
Full Name (Last, First, Middle Initial) SHERATON HOTEL		Transaction ID: SB21B-2573-660000 Date of Disbursement  12 07 07 2010
Mailing Address 870 WILLISTON RD	7.0.1	
BÚRLINGTON	State Zip Code VT 05403	Amount of Each Disbursement this Period
Purpose of Disbursement Lodging & Catering Candidate Name	Catego	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)	[MEMO ITEM]  Memo Entry
Full Name (Last, First, Middle Initial) Sheraton Philadelphia City Ctr		Transaction ID: SB21B-2573-670000 Date of Disbursement
Mailing Address 17th & Race Street		12 07 7 2010
City Philadelphia	State Zip Code PA 19103	Amount of Each Disbursement this Period
Purpose of Disbursement Lodging & Catering		1965.55
Candidate Name  Office Sought: House Disburse Senate President	Catego Type ment For: Primary General Other (specify) ▼	
State: District:	- Carron (GP 651.7)	
SUBTOTAL of Disbursements This Page (optional)		0.00

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

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SCHEDULE B (FEC Form 3X)	FOR LINE N	IUMBER: PAGE 133 / 260							
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only o	one)						
	Detailed Summary Page	X 21b 27	22						
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name									
NAME OF COMMITTEE (In Full)									
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	UNT							
Full Name (Last, First, Middle Initial) Sheraton Suites Wilmington			<b>Transaction ID:</b> SB21B-2573-680000 Date of Disbursement						
Mailing Address 422 Delaware Avenue			$\begin{bmatrix} 1 & 2 & M \\ 1 & 2 & M \end{bmatrix} / \begin{bmatrix} D & D \\ 0 & 7 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$						
	State Zip Code DE 19801		Amount of Each Disbursement this Period						
Purpose of Disbursement Lodging & Catering			6226.40						
Candidate Name		Category/ Type							
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼		[MEMO ITEM] Memo Entry						
State: District:	Other (Specify)								
Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES			<b>Transaction ID:</b> SB21B-2573-690000 Date of Disbursement						
Mailing Address 2702 LOVE FIELD DR			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$						
	State Zip Code TX 75235		Amount of Each Disbursement this Period						
Purpose of Disbursement Airfare			4419.80						
Candidate Name		Category/ Type	IMEMO ITEMI						
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		[MEMO ITEM] Memo Entry						
State: District:									
Full Name (Last, First, Middle Initial) Travel Agency Service			<b>Transaction ID:</b> SB21B-2573-700000 Date of Disbursement						
Mailing Address 3415 E Kiehl Ave			$\begin{bmatrix} 1 & 2 & M \\ 1 & 2 & M \end{bmatrix} / \begin{bmatrix} D & D \\ 0 & 7 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$						
	State Zip Code AR 72205		Amount of Each Disbursement this Period						
Purpose of Disbursement Travel Agent fee	[		7565.00						
Candidate Name	-	Category/							
Office Sought: House Disburse Senate	Primary General		[MEMO ITEM] Memo Entry						
State: President State:	Other (specify) ▼								
SUBTOTAL of Disbursements This Page (optional) .			0.00						

	CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS	Use separate so for each categor	y of the (	FOR LINE (check only	
		Detailed Summa	ry Page	27	28a 28b 28c 29
	ny Information copied from such Reports and Stat for commercial purposes, other than using the na				
$\overline{\ }$	NAME OF COMMITTEE (In Full)				
/	DEMOCRATIC NATIONAL COMMITTER	- TRAVEL OFFS	ET ACCOL	JNT	
	Full Name (Last, First, Middle Initial) United Airlines				<b>Transaction ID:</b> SB21B-2573-71000 Date of Disbursement
	Mailing Address 77 W. Wacker Drive				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 7 \end{smallmatrix} \end{bmatrix} \ \ \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$
	City Chicago	State Zip C			Amount of Each Disbursement this Period
	Purpose of Disbursement Airfare		Г	•	14965.90
	Candidate Name			Category/ Type	
	Office Sought: House Disbu Senate President	rsement For: Primary Other (specify)	General	), i	[MEMO ITEM] Memo Entry
	State: District:				
	Full Name (Last, First, Middle Initial) US Airways Group Inc.				<b>Transaction ID:</b> SB21B-2573-72000 Date of Disbursement
	Mailing Address 111 W. Rio Salado Pk	wy			12 D 07 Y 2010
	City Tempe	State Zip C AZ 8528			Amount of Each Disbursement this Period
	Purpose of Disbursement Airfare		Г		31593.60
	Candidate Name			Category/ Type	MENO ITEM
	Office Sought:  Senate  President  State:  Disbu	rsement For: Primary Other (specify)	General		[MEMO ITEM] Memo Entry
	Full Name (Last, First, Middle Initial) W Boston				Transaction ID: SB21B-2573-73000 Date of Disbursement
	Mailing Address 100 Stuart Street				$\begin{bmatrix}\begin{smallmatrix}M&2&M\\1&2&M\end{smallmatrix}\end{bmatrix}^\top \begin{bmatrix}\begin{smallmatrix}D&D&D\\0&7\end{smallmatrix}\end{bmatrix}^\top \begin{bmatrix}\begin{smallmatrix}Y&Y&Y&1&0\\2&0&1&0\end{smallmatrix}\end{bmatrix}^Y$
	City Boston	State Zip C MA 021			Amount of Each Disbursement this Period
	Purpose of Disbursement Lodging & Catering				5648.46
	Candidate Name			Category/	
		sement For:		Туре	[MEMO ITEM] Memo Entry
	Office Sought: House Disbu Senate President		General		

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lage# 11990120990			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only 21b 27	NUMBER: PAGE 135 / 260 y one)  22 23 24 25 26 28 28 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	DUNT	
Full Name (Last, First, Middle Initial) W Seattle			Transaction ID: SB21B-2573-740000 Date of Disbursement  M 2 M / D 7 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1112 4th Avenue			12 07 2010
•	State Zip Code WA 98101		Amount of Each Disbursement this Period 9080.49
Lodging & Catering Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)	.,,,,	[MEMO ITEM] Memo Entry
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2573-750000
The Westin San Francisco			Date of Disbursement
Mailing Address 1 Old Bayshore Hwy			$\begin{bmatrix} M & M \\ 1 & 2 & M \end{bmatrix} / \begin{bmatrix} D & D \\ 0 & 7 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}^{Y}$
City Millbrae	State Zip Code CA 94030		Amount of Each Disbursement this Period
Purpose of Disbursement Lodging & Catering			2974.71
Candidate Name		Category/ Type	[MEMO ITEM]
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		Memo Entry
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2573-760000
The Westin Seattle			Date of Disbursement
Mailing Address 1900 5th Avenue			12 M / 07 / 2010 Y
City Seattle	State Zip Code WA 98101		Amount of Each Disbursement this Period
Purpose of Disbursement Lodging & Catering			6203.10
Candidate Name		Category/	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	Туре	[MEMO ITEM] Memo Entry
State: District:	(opoon)) <b>\</b>		
SUBTOTAL of Disbursements This Page (optional)		<b>)</b>	0.00

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	CHEDULE B (FEC Form 3)	Use separate scriedule(s)					NE NUMBER: PAGE 136 / 260 only one)									
11	EMIZED DISBURSEMENT		iled Summary Page		X	21b 27	22 28a	$\Box$	23 28b		24 28c		25 29	26		
	y Information copied from such Reports ar for commercial purposes, other than using													s		
$\rangle$	NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMM	ITTEE - TRAV	EL OFFSET ACC	OU	NT											
	Full Name (Last, First, Middle Initial) Avis Rental Fines						Date	of Di	sburs	sem	ent			70000		
	Mailing Address 7681 E. Gray Ro	ad					1 <sup>M</sup> 2			0 7		. 2	0 1	0		
	City Scottsdale	State AZ	Zip Code 85260				Amou	int o	Eacl	h D	sburse	emen	nt this	Period		
	Purpose of Disbursement Car Rental				·							_	25.00	)		
	Candidate Name			С	ateg Typ	-				_						
	Senate President	Disbursement F Prima Other		<b>!</b>			Memo			]						
—	State: District:  Full Name (Last, First, Middle Initial)						Trans	acti	on ID	)-	SR21	R-2F	573-7	80000		
	Plate Pass						Date		sburs	sem	ent					
	Mailing Address 7681 East Gray F	Road					1 2	IVI		0 7	J'L	2	0 1	) <sup>'</sup>		
	City Scottsdale	State AZ	Zip Code 85260				Amou	int o	Eacl	h D	sburse	emen	nt this	Period		
	Purpose of Disbursement Car Rental			Г	•		<u> </u>		_	0			60.50	)		
	Candidate Name			С	ateg Typ	-		ı	T = 8.4	,						
	Office Sought: House Senate President	Disbursement F Prima Other					Memo			J						
	State: District:  Full Name (Last, First, Middle Initial) Scott Alston						<b>Trans</b> Date				SB21 ent	B-20	065			
	Mailing Address 409 W. Ellet Stre	et					1 <sup>M</sup> 2	М	D (	0 8	] / [	Ž	01	O Y		
	City Philadelphia	State PA	Zip Code 19119				Amou	int o	Eacl	h D	sburse	emer	nt this	Period		
	Purpose of Disbursement Travel & Subsistence Expense Reimb			Г	v		L.	_	_			1	79.52	2		
	Candidate Name			С	ateg Typ											
	Office Sought: House Senate President	Disbursement F Prima Other		I	٠,٢٧	-	-									
	State: District:		X 1 == 3/ ▼													

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

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		FOR LIN								260	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 21b 27	2	22 28a	23 28b	F	24 28c	П	25 29	26 30b	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				n for th	e pu	rpose of				utions	<b>3</b>	
NAME OF COMMITTEE (In Full)												
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUN	IT									
Full Name (Last, First, Middle Initial)				Ti	rans	action IE	<b>D</b> :	SB21E	3-20	66		
Patrick Bauer				D	ate o	of Disburs	sem	nent				
Mailing Address 82 Sea Cliff Avenue				12 08 7 2010								
,	State Zip Code NY 11579			A	mou	nt of Eac	h D	isburse	men	t this f	Period	
Purpose of Disbursement			-	7 L					- 1	23.04		
Travel Expense												
Candidate Name			tegory/ Type									
Senate President	ment For: Primary General Other (specify)											
State: District:												
Full Name (Last, First, Middle Initial) Patrick Bauer						action IE of Disburs		_	3-20	67		
Mailing Address 82 Sea Cliff Avenue				12 M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							) <sup>Y</sup>	
,	State Zip Code NY 11579			A	mou	nt of Eac	h D	isburse	men	t this f	Period	
Purpose of Disbursement Travel & Subsistence Expense Reimb			•	T L					1	61.28		
Candidate Name			tegory/ Гуре									
Senate President	ment For: Primary General Other (specify)											
State: District:												
Full Name (Last, First, Middle Initial) Eric Blackwell						action II of Disburs			3-20	68		
Mailing Address 209 Country Club Drive				- [	<sup>M</sup> 2	M / D	0 8	) / Y	ž	0 Ĭ (	Y	
	State Zip Code AR 72010			A	mou	nt of Eac	h D	isburse	men	t this f	Period	
Purpose of Disbursement Travel Expense									,	30.00		
Candidate Name			tegory/ Type									
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)											
State: District:												
SUBTOTAL of Disbursements This Page (optional)			•						21	14.32		

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SCHEDULE B (FEC Form 3X)  Use separate schedule(s)				E NUMBE	R:		P	AGE	138	/ 260				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	1 -	check or 21b 27	22 28a	П	23 28b	24 28c	F	25 29	П	26 30b			
Any Information copied from such Reports and Statemor for commercial purposes, other than using the name										s				
NAME OF COMMITTEE (In Full)														
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	OUN <sup>-</sup>	Т											
Full Name (Last, First, Middle Initial) Eric Blackwell				Transaction ID: SB21B-2069 Date of Disbursement										
Mailing Address 209 Country Club Drive				12 D 0 8 Y 2 0 1 0 Y										
,	State Zip Code AR 72010			Amount of Each Disbursement this Period										
Purpose of Disbursement Travel & Subsistence Expense Reimb	72010		•					6	00.00	)				
Candidate Name			egory/ ype											
Office Sought: House Disburser Senate President	ment For: Primary General Other (specify)	•	, i -											
State: District:														
Full Name (Last, First, Middle Initial) ANDREW BLOCK				Date	of Di	sburse		B-20	070					
Mailing Address 142 East 79th Street, Apt	L			1 <sup>M</sup> 2	М	<sup>D</sup> 0	8 /	Ž	2 0 1 (	0 <sup>Y</sup>				
	State Zip Code NY 10075			Amou	ınt of	f Each	Disburs	-			d			
Purpose of Disbursement Travel & Subsistence Expense Reimb				L.	-	-		.5	00.00	J				
Candidate Name			egory/ ype											
Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify)													
State: District: Full Name (Last, First, Middle Initial)							0004	D 0	24					
Miriam S. Briskman				Date		sburse	D /			Y				
Mailing Address 1209 7th Street, NW, Apt				1 2			8	^	2 0 1 (					
Washington	State Zip Code DC 20001			Amou	ınt of	f Each	Disburs		nt this		d			
Purpose of Disbursement Travel Expense					-			-	31.43	9				
Candidate Name			egory/ ype											
Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify) ▼													
SUBTOTAL of Disbursements This Page (optional)			. •	Ĭ.	_			11	31.49	9				
TOTAL This Period (last page this line number only)														

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SCHEDULE B (FEC Form 3X)	FOR LINE		PAGE 139 / 260	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 28b	24 25 26 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		by any person for	or the purpose of soli	citing contributions
NAME OF COMMITTEE (In Full)	e and address of any political	Committee to son	icit contributions from	ii sucii committee
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	TNUC		
Full Name (Last, First, Middle Initial) Miriam S. Briskman			Transaction ID: Date of Disbursen	
Mailing Address 1209 7th Street, NW, Apr	: 303		12 08	2010
•	State Zip Code DC 20001		Amount of Each D	Disbursement this Period
Purpose of Disbursement Airline Baggage Fees		• •		25.00
Candidate Name		Category/ Type		
Senate President	ment For: Primary General Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial) Miriam S. Briskman			Transaction ID: Date of Disbursen	nent
Mailing Address 1209 7th Street, NW, Ap	: 303		12 08	B
•	State Zip Code DC 20001		Amount of Each D	Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		· · ·		700.00
Candidate Name		Category/ Type		
Senate President	ment For: Primary General Other (specify) ▼			
State: District: Full Name (Last, First, Middle Initial)			Transaction ID:	CD01D 0074
Miriam S. Briskman			Date of Disbursen	nent
Mailing Address 1209 7th Street, NW, Apr	: 303		12 08	2010
	State Zip Code DC 20001		Amount of Each D	Disbursement this Period
Purpose of Disbursement Travel Expense				20.00
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	71		
State: District:	,			
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>		745.00

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	
TI LIMIZED DISBORSEMENTS	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	DUNT	
Full Name (Last, First, Middle Initial) Miriam S. Briskman			Transaction ID: SB21B-2075 Date of Disbursement
Mailing Address 1209 7th Street, NW, Apt	303		12 08 7 2010
,	State Zip Code DC 20001		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees		• •	50.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)	,,	
Full Name (Last, First, Middle Initial) Miriam S. Briskman			Transaction ID: SB21B-2076 Date of Disbursement
Mailing Address 1209 7th Street, NW, Apt	303		$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 1 & 2 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
,	State Zip Code DC 20001		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			500.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) MICHAEL CAREY			Transaction ID: SB21B-2077 Date of Disbursement
Mailing Address 212 W. 16th Street, Apt 2	R		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 8 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
	State Zip Code NY 10011		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		•	600.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	(opean,) <b>\</b>		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	1150.00

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) James Carney			Transaction ID: SB21B-2078 Date of Disbursement
Mailing Address 4828 W Street, NW			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
	State Zip Code DC 20007		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			80.94
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) NORA COHEN			Transaction ID: SB21B-2079 Date of Disbursement
Mailing Address 1650 Park Road, NW, Ap	ot B		$\begin{bmatrix} 1 & 2 & M \\ 1 & 2 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 0 \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 0 \end{bmatrix} $
•	State Zip Code DC 20010		Amount of Each Disbursement this Period
Purpose of Disbursement			19.00
Travel Expense Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	. 76-2	
State: District:			
Full Name (Last, First, Middle Initial) NORA COHEN			<b>Transaction ID:</b> SB21B-2080 Date of Disbursement
Mailing Address 1650 Park Road, NW, Ap	ot B		12 M / D 8 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	State Zip Code DC 20010		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		•	132.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
SURTOTAL of Dishursements This Page (ontinnal)			231.94

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SCHEDULE B (FEC Form 3X)	FOR LINE	NUMBER: PAGE 142 / 260	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
TI EINIZED DIODOTTOLINETTIO	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2081
NORA COHEN			Date of Disbursement
Mailing Address 1650 Park Road, NW, Ap	ot B		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 8 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
City Washington	State Zip Code DC 20010		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		0 0	12.51
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) NORA COHEN			Transaction ID: SB21B-2082 Date of Disbursement
Mailing Address 1650 Park Road, NW, Ap	ot B		$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 1 & 2 & M \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 0 & N \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 & Y \end{smallmatrix} \end{bmatrix}$
City Washington	State Zip Code DC 20010		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			448.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	· · · · · · · · · · · · · · · · · · ·		
Full Name (Last, First, Middle Initial) Bryan DeAngelis			Transaction ID: SB21B-2083 Date of Disbursement
Mailing Address 1418 Florida Ave., NW, A	Apt 1		12 M / D B / Y 2 0 1 0 Y
City Washington	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			10.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
SURTOTAL of Dishursements This Page (ontional)			470.51

C.

SCHEDULE B (FEC Form 3X)	FOR LINE	NUMBER:	PAGE 143 / 260	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only		7762 1407200
	Detailed Summary Page	X 21b 27		24 25 26 28c 29 30
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		d by any person for	or the purpose of soliciti	ng contributions
NAME OF COMMITTEE (In Full)				
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT		
Full Name (Last, First, Middle Initial) Bryan DeAngelis			Transaction ID: SE Date of Disbursemen	
Mailing Address 1418 Florida Ave., NW, A	Apt 1		12 08	2010
City Washington	State Zip Code DC 20009		Amount of Each Disb	oursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb	20000			400.00
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	,,		
State: District:	, (1 <i>3)</i> , <b>V</b>			
Full Name (Last, First, Middle Initial) James Doody			Transaction ID: SE Date of Disbursemen	
Mailing Address 44 Hidden Valley Drive			12 08	2010
City Newark	State Zip Code DE 19711		Amount of Each Disb	
Purpose of Disbursement Travel Expense		•		67.00
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) James Doody			Transaction ID: SE Date of Disbursemen	
Mailing Address 44 Hidden Valley Drive			1 2 M / D 8	2010
City Newark	State Zip Code DE 19711		Amount of Each Disb	oursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb				700.00
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)			
State: District:	- · · · ·			
SURTOTAL of Dishursements This Page (ontional)				1167.00

В.

C.

SCHEDULE B (FEC Form 3X)	e(s) FOR LINE NUMBER: PAGE 144 / 260 (check only one)										
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 21b	F	22 28a	П	23 28b	24		25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name											s
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUN	NT								
Full Name (Last, First, Middle Initial)  Eugene Kang  Mailing Address 1606 15th Street, NW, #3					Date		sburse	: SB2 ement	21B-2	2087 Ž 0 1	n Y
									<u> </u>		
,	State Zip Code DC 20009				Amou	ınt of	Each	Disbu	sem	ent this	
Purpose of Disbursement Travel & Subsistence Expense Reimb					L.	_	•			57.6	5
Candidate Name			ategory/ Type								
Office Sought:  Senate President State:  Disburse	ement For: Primary General Other (specify)										
Full Name (Last, First, Middle Initial) DURWIN LAIRY							on ID:	: SB2 ement	21B-2	2088	
Mailing Address 1006 EAST 11TH STREE	ΞΤ				1 <sup>M</sup> 2	М	<sup>D</sup> 0	8	Υ	ž 0 1	0 Y
,	State Zip Code AR 72114				Amou	ınt ol	Each	Disbu	sem	ent this	Period
Purpose of Disbursement Travel Expense			•			_				50.0	0
Candidate Name			ategory/ Type								
Senate President	ment For: Primary General Other (specify)										
State: District:  Full Name (Last, First, Middle Initial)								000	4.0	2000	
Jennifer Larus					Date	of Di	sburse	: SB2 ement	(IB-)		V
Mailing Address 14684 Sailboat Circle					1 <sup>M</sup> 2	М	<sup>D</sup> 0	8	Y	ž 0 1	0 1
	State Zip Code VA 23112				Amou	int of	Each	Disbu	sem	ent this	Period
Purpose of Disbursement							_			192.5	7
Travel Expense Candidate Name			ategory/ Type								
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		. ypc								
State: District:											
SUBTOTAL of Disbursements This Page (optional) .			•	•						300.2	2

C.

SCHEDULE B (FEC Form 3X)	Harana Harana	FOR LINE	NUMBER: PAGE 145 / 260
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2090
Jennifer Larus			Date of Disbursement
Mailing Address 14684 Sailboat Circle			$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 1 & 2 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Midlothian	State Zip Code VA 23112		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			700.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	71	
State: District:	Other (specify)		
Full Name (Last, First, Middle Initial) Nicole Lynch			Transaction ID: SB21B-2091 Date of Disbursement
Mailing Address 7 Avenue A, 2nd Floor			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 8 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City New York	State Zip Code NY 10009		Amount of Each Disbursement this Period
Purpose of Disbursement			87.42
Travel Expense Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	7,75	
State: District:			
Full Name (Last, First, Middle Initial) Nicole Lynch			Transaction ID: SB21B-2092 Date of Disbursement
Mailing Address 7 Avenue A, 2nd Floor			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 12 \end{smallmatrix} \end{bmatrix} \ ^{\prime} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 08 \end{smallmatrix} \end{bmatrix} \ ^{\prime} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2010 \end{smallmatrix} \end{bmatrix} \ ^{Y}$
City New York	State Zip Code NY 10009		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			800.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		
State: District:			
SURTOTAL of Dishursements This Page (ontional)			1587.42

C.

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 146 / 260
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	X 21b 27	22 23 24 25 2 28a 28b 28c 29 3
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) Julianna Manzi			<b>Transaction ID:</b> SB21B-2093 Date of Disbursement
Mailing Address 60 West 66th Street, Apt	17F		$\begin{bmatrix}\begin{smallmatrix}M\\12\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}D\\0\end{smallmatrix}\end{bmatrix}^D \begin{bmatrix}\begin{smallmatrix}D\\8\end{smallmatrix}\end{bmatrix}^D \begin{bmatrix}\begin{smallmatrix}Y\\2\end{smallmatrix}\end{bmatrix} \begin{bmatrix}\begin{smallmatrix}Y\\2\end{smallmatrix}\end{bmatrix} \begin{bmatrix}Y\\0\end{smallmatrix}\end{bmatrix}$
City New York	State Zip Code NY 10023		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			600.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	· · ·		
Full Name (Last, First, Middle Initial) Matthew McGrath			Transaction ID: SB21B-2094 Date of Disbursement
Mailing Address 1860 North Scott Street,	Apt 240		$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 1 & 2 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 0 & B \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Arlington	State Zip Code VA 22209		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			37.65
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Matthew McGrath			<b>Transaction ID:</b> SB21B-2095 Date of Disbursement
Mailing Address 1860 North Scott Street,	Apt 240		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 12 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 08 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2010 \end{smallmatrix} ]$
City Arlington	State Zip Code VA 22209		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			145.53
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
SURTOTAL of Dishursements This Page (ontional)			783.18

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ge# 11990129002			
SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only X 21b 27	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		y any person fo	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  DEMOCRATIC NATIONAL COMMITTEE -	<u> </u>		
y beinger ivition viriouvie denvirin tee	THE CONTROL TRACE	0111	
Full Name (Last, First, Middle Initial)  Matthew McGrath			Transaction ID: SB21B-2096 Date of Disbursement
Mailing Address 1860 North Scott Street,	Apt 240		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
•	State Zip Code VA 22209		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			77.12
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			T .: IB ODOLD 0007
Matthew McGrath			Transaction ID: SB21B-2097 Date of Disbursement
Mailing Address 1860 North Scott Street,	Apt 240		12 0 8 7 2 0 1 0
,	State Zip Code VA 22209		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees	1		22.50
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial)  Matthew McGrath			Transaction ID: SB21B-2098 Date of Disbursement
Mailing Address 1860 North Scott Street,	Apt 240		$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 1 & 2 & M \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 0 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
	State Zip Code VA 22209		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			271.58
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼		
State: District:			
SUBTOTAL of Disbursements This Page (optional) .		<u>►</u>	371.20

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ago# 11000120000			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	
		27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCC	DUNT	
Full Name (Last, First, Middle Initial) Matthew McGrath			Transaction ID: SB21B-2099 Date of Disbursement
Mailing Address 1860 North Scott Street, A	Apt 240		12 M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
•	State Zip Code VA 22209		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			34.64
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial)  Matthew McGrath			Transaction ID: SB21B-2100 Date of Disbursement
Mailing Address 1860 North Scott Street, A	Apt 240		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 8 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
•	State Zip Code VA 22209		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			30.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼	,	
State: District: Full Name (Last, First, Middle Initial)			
Matthew McGrath			Transaction ID: SB21B-2101 Date of Disbursement
Mailing Address 1860 North Scott Street, A	Apt 240		12 M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	State Zip Code VA 22209		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			201.30
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	1 300	
State: District:	Carior (opoonly) ♥		
SUBTOTAL of Disbursements This Page (optional) .			265.94

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

Any	EMIZED DISBURSEMENTS		rate schedule(s)		(oh	eck onl	v ono)				L	PAGE			
			category of the Summary Page		X	21b 27	22 28a	E	23 28	L	2/	4 3c	25 29		26 30
or fo	Information copied from such Reports and Statem or commercial purposes, other than using the name													S	
	NAME OF COMMITTEE (In Full)  DEMOCRATIC NATIONAL COMMITTEE -						more doi	10100		3 110			milloc		
	Full Name (Last, First, Middle Initial) Kerry McNellis						_				SB2 ment	21B-2	102		
Ī	Mailing Address 6 Dover Court						1 ·	2 M	/	<sup>D</sup> 0	8 /	Y	ž 0 1 (	) Y	
	,	State CA	Zip Code 94070				Am	ount	of E	ach I	Disbu	rseme	nt this	Perio	od
	Purpose of Disbursement Travel Expense			Г	•								15.50	)	
ĺ	Candidate Name				ateg Type										
ì	Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General cify) ▼												
	State: District:														
	Full Name (Last, First, Middle Initial) Kerry McNellis						Dat	e of I		urse	ment	21B-2			
ļ	Mailing Address 6 Dover Court						1	2 M	′	<sup>D</sup> 0	8 /	Y 2	ž 0 1 (	) Y	
	,	State CA	Zip Code 94070				Am	ount	of E	ach I	Disbu		nt this I		od
	Purpose of Disbursement Travel & Subsistence Expense Reimb				•		L			_			700.00	)	_
_	Candidate Name				ateg Typ	-									
(	Senate President	ment For: Primary Other (spe	General cify) ▼												
	State: District:  Full Name (Last, First, Middle Initial)  ANDREA MOKROS										SB2	21B-2	104		
Ī	Mailing Address 2922 ALDRICH AVENUE	S, #515					1 x	2 M	/	<sup>D</sup> 0	8 /	Y	ž o ž (	) Y	
		State MN	Zip Code 55408				Am	ount	of E	ach l	Disbu	rseme	nt this	Perio	od
	Purpose of Disbursement Travel Expense			Г	•								59.0	1	_
_	Candidate Name				ateg Typ	-									
	Senate President	ment For: Primary Other (spe	General cify)												
	State: District:														_
su	IBTOTAL of Disbursements This Page (optional) .	·····	<u></u>	<u></u>	<u></u>	<u> </u>						7	74.51	1	

C.

SCHEDULE B (FEC Form 3X)	Use separate sched	dulo(e)		NUMBER:	PAGE 150 / 260
ITEMIZED DISBURSEMENTS	for each category of Detailed Summary I	f the (	(check on X 21b 27	ly one) 22 23 28a 28b	24 25 26 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			any person	for the purpose of	soliciting contributions
NAME OF COMMITTEE (In Full)	and address of any p	ontical col	THITIECE TO 3	Short Continuations	nom such commuce
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET	ACCOL	JNT		
Full Name (Last, First, Middle Initial) ANDREA MOKROS				Date of Disbur	
Mailing Address 2922 ALDRICH AVENUE	S, #515			12 / 0	08 7 2010
•	State Zip Code MN 55408	Э		Amount of Eac	h Disbursement this Period
Purpose of Disbursement Airline Baggage Fees					16.00
Candidate Name			Category/ Type		
Senate President	ment For: Primary Gel Other (specify)	neral			
State: District: Full Name (Last, First, Middle Initial)				T	D 0001D 0100
ANDREA MOKROS				Date of Disbur	
Mailing Address 2922 ALDRICH AVENUE	S, #515			12 / 0	08 7 2010
•	State Zip Code MN 55408	Э		Amount of Eac	ch Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		Tr		L	161.28
Candidate Name			Category/ Type		
Senate President	ment For: Primary Ge Other (specify)	neral			
State: District: Full Name (Last, First, Middle Initial)				Transaction II	<b>D</b> : SB21B-2107
ANDREA MOKROS				Date of Disbur	sement
Mailing Address 2922 ALDRICH AVENUE	S, #515			12 / 0	08 7 2010
	State Zip Code MN 55408	<del>)</del>		Amount of Eac	ch Disbursement this Period
Purpose of Disbursement Travel Expense			• •		153.47
Candidate Name			Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary Ge Other (specify)	neral	. 760		
State: District:	(-i: 'J) ▼				
SUBTOTAL of Disbursements This Page (optional) .					330.75

В.

C.

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

FOR LINE NUMBER: PAGE 151 / 260 Use separate schedule(s) (check only one) for each category of the 21b 22 23 24 25 26 Detailed Summary Page 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-2108 ANDREA MOKROS Date of Disbursement 0 8 **1** 2 2010 Mailing Address 2922 ALDRICH AVENUE S, #515 Zip Code City State Amount of Each Disbursement this Period **MINNEAPOLIS** MN 55408 600.00 Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name Category/ Type Office Sought: House Disbursement For: General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-2109 Jaime Moore Date of Disbursement **1** 2 08 2010 Mailing Address 1451 Walz Avenue City State Zip Code Amount of Each Disbursement this Period Glenwood Springs 81601 CO 500.00 Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-2110 Jaime Moore Date of Disbursement 08 2010 Mailing Address 1451 Walz Avenue City State Zip Code Amount of Each Disbursement this Period Glenwood Springs CO 81601 500.00 Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District:

SUBTOTAL of Disbursements This Page (optional) ...

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

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SCHEDULE B (FEC Form 3X)	Han amount or bridge (N	FOR LINE I	NUMBER: PAGE 152 / 260
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name	ents may not be sold or used	by any person fo	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	e and address of any political	committee to soil	icit contributions from such committee
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) PETER NEWELL			Transaction ID: SB21B-2111 Date of Disbursement
Mailing Address 2401 Calvert Street, NW,	Apt 924		12 M / D B / Y Y Y Y Y
•	State Zip Code DC 20008		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			29.09
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify) ▼		
State: District:  Full Name (Last, First, Middle Initial)			Transaction ID: CD01D 0110
PETER NEWELL			Transaction ID: SB21B-2112 Date of Disbursement
Mailing Address 2401 Calvert Street, NW,	Apt 924		$\begin{bmatrix} 12 \\ 12 \end{bmatrix} / \begin{bmatrix} 08 \\ 08 \end{bmatrix} / \begin{bmatrix} 2010 \\ 10 \end{bmatrix}$
•	State Zip Code DC 20008		Amount of Each Disbursement this Period
Purpose of Disbursement			325.90
Travel & Subsistence Expense Reimb  Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)	71-	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2113
Michael O'Mary			Date of Disbursement  12 08 2010
Mailing Address 65 W. 70th Street, Apt 28			12 M / D B / Y Y Y Y Y Y
	State Zip Code NY 10023		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			600.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	Nr. 2	
State: District:			
SUBTOTAL of Disbursements This Page (optional) .			954.99

C.

age# 11990129008			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	
		27	28a 28b 28c 29 30b
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	TNUC	
Full Name (Last, First, Middle Initial) JENNIFER POLENZANI			Transaction ID: SB21B-2114 Date of Disbursement
Mailing Address 7918 ELECTRA DRIVE			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City LOS ANGELES	State Zip Code CA 90046		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense Candidate Name		Category/	135.94
	ement For:  Primary General	Type	
President State: District:	Other (specify)		
Full Name (Last, First, Middle Initial) JENNIFER POLENZANI  Mailing Address 7040 FL FOTRA DRIVE			Transaction ID: SB21B-2115 Date of Disbursement    M
Mailing Address 7918 ELECTRA DRIVE			
City LOS ANGELES	State Zip Code CA 90046		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			8.99
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify) ▼		
State: District: Full Name (Last, First, Middle Initial)			
JENNIFER POLENZANI			Transaction ID: SB21B-2116 Date of Disbursement
Mailing Address 7918 ELECTRA DRIVE			$\begin{bmatrix} M & M \\ 1 & 2 \end{bmatrix}^M & \begin{bmatrix} D & D \\ D & 0 \end{bmatrix}^M & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}^Y$
City LOS ANGELES	State Zip Code CA 90046		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			157.41
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		
State: District:			
SUBTOTAL of Disbursements This Page (optional)		<b></b>	302.34

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	7 cne) ☐ 22
	Detailed Summary Fage	27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2117
Jamal Pope			Date of Disbursement
Mailing Address 652 F Street, NE, Apt 3			12 M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		•	70.68
Candidate Name		Category/ Type	
	ment For:	. 7/2-2	
Senate President	Primary General Other (specify) ▼		
State: District: Full Name (Last, First, Middle Initial)			
Jamal Pope			Transaction ID: SB21B-2118 Date of Disbursement
Mailing Address 652 F Street, NE, Apt 3			$\begin{bmatrix}\begin{smallmatrix}M & 2 & M \\ 1^M & 2^M & 1^M & 2^M & 1^M & 2^M & 1^M & 2^M \\ 1^M & 2^M & 1^M & 1^$
City	State Zip Code		Amount of Each Disbursement this Period
Washington	DC 20002		19.00
Purpose of Disbursement Airline Baggage Fees			19.00
Candidate Name		Category/ Type	
	ment For:		
Senate President	Primary General Other (specify) ▼		
State: District:	Carior (opcomy)		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2119
Jamal Pope			Date of Disbursement
Mailing Address 652 F Street, NE, Apt 3			12 M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		• •	242.82
Candidate Name		Category/ Type	
	ment For:		
Senate President	Primary General Other (specify)		
State: District:	Other (Specify)		
SURTOTAL of Dichureaments This Page (ontional)			332.50

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) Garth Spencer			Transaction ID: SB21B-2120 Date of Disbursement
Mailing Address 1150 K Street, NW, #100	7		12 M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code DC 20005		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			201.30
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: CD01D 0101
Garth Spencer			Transaction ID: SB21B-2121 Date of Disbursement
Mailing Address 1150 K Street, NW, #100	7		$\begin{bmatrix}\begin{smallmatrix}M & 2 & M \\ 1^M & 2^M & 0^M & 0^M \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix}\begin{smallmatrix}V & 2^M & 0^M \\ 2^M & 0^M & 0^M \end{smallmatrix} \end{bmatrix}$
,	State Zip Code DC 20005		Amount of Each Disbursement this Period
Purpose of Disbursement	20000		125.44
Travel & Subsistence Expense Reimb  Candidate Name		Catagony	
		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial)  Duncan Teater			Transaction ID: SB21B-2122 Date of Disbursement
Mailing Address 1545 3rd Street, NW			$\begin{bmatrix} M & M \\ 1 & 2 \end{bmatrix} & \begin{bmatrix} D & D \\ D & 0 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	State Zip Code DC 20001		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			8.90
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	-	
State: District:			
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	335.64

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

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SCHEDULE B (FEC Form 3X)	Use separate scriedule(s)   (chook		FOR LIN			R:	PAGE 156 / 260						
ITEMIZED DISBURSEMENTS		category of the Summary Page		_	21b 27	F	22 28a	П	23 28b	24 280	F	25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name													5
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL	OFFSET ACC	NUO	N <sup>-</sup>	Γ								
Full Name (Last, First, Middle Initial)  Duncan Teater  Mailing Address 1545 3rd Street, NW							Date o		sburse	SB2- ement		123 Ž 0 Ť (	) <sup>Y</sup>
•	State DC	Zip Code 20001					Amou	nt o	f Each	Disburs	emei		
Purpose of Disbursement Airline Baggage Fees Candidate Name					egory/			•	•			4.00	
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General ecify) ▼											
Full Name (Last, First, Middle Initial)  Duncan Teater  Mailing Address 1545 3rd Street, NW							Date o		sburse	SB2- ement		124 2 0 1 (	) <sup>Y</sup>
City	State	Zip Code					Amou	nt o	f Each	Disburs	emei	nt this	Period
Washington Purpose of Disbursement Travel & Subsistence Expense Reimb	DC	20001	Г	v	-							29.12	2
Candidate Name					egory/ ype								
Senate President	ment For: Primary Other (spe	General cify) ▼											
State: District: Full Name (Last, First, Middle Initial) Lauren Thorbjornsen									on ID:	SB2	B-2	125	
Mailing Address 2480 16th Street, NW, Ap	ot 745						<sup>M</sup> 2	М	0	8 /	Y	ž 0 1 (	) <sup>Y</sup>
	State DC	Zip Code 20009					Amou	nt o	f Each	Disburs	emei		
Purpose of Disbursement Travel Expense				·			L.					30.00	)
Candidate Name  Office Sought: House Disburse	ment For:				egory/ ype								
Senate President	Primary Other (spe	General <b>▼</b>											
State: District:												-	
SUBTOTAL of Disbursements This Page (optional) .					. <b>•</b>		L.					63.12	2

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one)  22
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE			
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2126
Lauren Thorbjornsen			Date of Disbursement
Mailing Address 2480 16th Street, NW, A	pt 745		$ \begin{bmatrix} M & M \\ 1 & 2 \end{bmatrix}  \begin{bmatrix} D & 0 & 0 \\ 0 & 0 & 8 \end{bmatrix}  \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $
City Washington	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement			390.50
Travel & Subsistence Expense Reimb  Candidate Name		Category/ Type	
Office Sought:    House   Disburs     Senate   President     State: District:	ement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2127
Katherine Young			Date of Disbursement
Mailing Address 506 M Street, NW, Apt E	3		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 12 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 08 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2010 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} Y & Y & Y & Y \\ 100 & 100 \end{smallmatrix} \end{bmatrix}$
City Washington	State Zip Code DC 20001		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		-	43.61
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) Kirk T. Hanlin			Transaction ID: SB21B-2128 Date of Disbursement
Mailing Address 1276 N Wayne Street, #	321		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 8 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
City Arlington	State Zip Code VA 22201		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			212.16
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)	. 760	
State: District:			
SUBTOTAL of Disbursements This Page (optional)			646.27

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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 158 / 260
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
- 3 <del>3</del>	Detailed Summary Page	X 21b 27		24 25 26 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT		
Full Name (Last, First, Middle Initial) John Toohey			Transaction ID: SE Date of Disbursemen	-
Mailing Address 15 Cranston Street, Apt (	<u> </u>		12 08	<sup>'</sup> 2010 <sup>'</sup>
•	State Zip Code MA 02130		Amount of Each Disb	ursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb	02100			123.42
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	7,77		
State: District:	Other (specify)			
Full Name (Last, First, Middle Initial) ALEX BAKER			Transaction ID: SE Date of Disbursemen	t
Mailing Address 1474 Columbia Rd., NW	Apt 311		12 09	Ž O Ĭ O Š
•	State Zip Code DC 20009		Amount of Each Disb	
Purpose of Disbursement Travel & Subsistence Expense Reimb				700.00
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) John Click			Transaction ID: SE Date of Disbursemen	t
Mailing Address 1915 17th Street, NW			12 09	<sup>'</sup> 2010 <sup>'</sup>
	State Zip Code DC 20009		Amount of Each Disb	ursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb				700.00
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼			
State: District:				
SURTOTAL of Dishursements This Page (ontional)				1523.42

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	
		27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	DUNT	
Full Name (Last, First, Middle Initial) NORA COHEN			Transaction ID: SB21B-2132 Date of Disbursement
Mailing Address 1650 Park Road, NW, Ap	t B		12 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code DC 20010		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			49.01
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) NORA COHEN			Transaction ID: SB21B-2133 Date of Disbursement
Mailing Address 1650 Park Road, NW, Ap	t B		$\begin{bmatrix} 1 & 2 & M \\ 1 & 2 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 2 & 0 & 1 \\ 0 & 0 & M \end{bmatrix}$
	State Zip Code DC 20010		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			40.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	,,	
State: District: Full Name (Last, First, Middle Initial)			
NORA COHEN			Transaction ID: SB21B-2134 Date of Disbursement
Mailing Address 1650 Park Road, NW, Ap	t B		$\begin{bmatrix} 1 & 2 & M \\ 1 & 2 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 2 & 0 & 1 \\ 0 & 0 & M \end{bmatrix}$
	State Zip Code DC 20010		Amount of Each Disbursement this Period
Purpose of Disbursement			336.00
Travel & Subsistence Expense Reimb  Candidate Name		Category/	
		Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	(opoon)/ <b>\</b>		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	425.01

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

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	NUMBER: PAGE 160 / 260 / one)
TEMPES SISSONISEMENTS	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) JAMES DENBO			Transaction ID: SB21B-2135 Date of Disbursement
Mailing Address 6006 Overlea Road			12 0 0 0 7 2 0 1 0
,	State Zip Code MD 20816		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		, · ·	800.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial) Monique Dorsainvil			Transaction ID: SB21B-2136 Date of Disbursement
Mailing Address 1204 Lamont Street, NW			12
,	State Zip Code DC 20010		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			800.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Michael Epstein			Transaction ID: SB21B-2137 Date of Disbursement
Mailing Address 134 Oxford Drive			12 0 0 0 7 2 0 1 0 9
	State Zip Code NJ 07670		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			800.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	· · · · · · · · · · · · · · · · · · ·		
SUBTOTAL of Disbursements This Page (optional) .		<b>)</b>	2400.00

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

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TEMIZED DISBURSEMENTS  Use separate schedule(s) for each category of the Detailed Summary Page  (check only one)    X   21b	.30"			
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions for or commercial purposes, other than using the name and defress of any political committee to solicit contributions from such committee or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee or contributions from such cont	SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	for each category of the	(check only 21b	one) 22 23 24 25 26
NAME OF COMMITTEE (In Full)  DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT  Full Name (Last, First, Middle Initial) Amy Greene  Mailing Address 1091 Clubhouse Drive  City Lake Isabella Mi 48893  Purpose of Disbursement Travel Expense Candidate Name  Office Sought: House Prisedent Alline Baggage Fees Candidate Name  Office Sought: House Prisedent Alline Baggage Fees Candidate Name  Office Sought: House Disbursement For: Candidate Name  Office Sought: House Disbursement For: Candidate Name  Office Sought: House Primary General Office Sought: House Disbursement For: Candidate Name  Office Sought: House Disbursement For: Candidate Name  Office Sought: House Primary General Other (specify) ▼  Transaction ID: SB21B-2139 Date of Disbursement  To 8  Amount of Each Disbursement this Period  Type  Office Sought: House Disbursement For: Cardidate Name  Office Sought: House State Zip Code Lake Isabella Mil 4893  Transaction ID: SB21B-2140 Date of Disbursement Initial Primary General  Transaction ID: SB21B-2140 Date of Disbursement Initial Primary General  Transaction ID: SB21B-2140 Date of Disbursement Initial Primary General  Transaction ID: SB21B-2140 Date of Disbursement Initial Primary General  Transaction ID: SB21B-2140 Date of Disbursement Initial Primary General  Transaction ID: SB21B-2140 Date of Disbursement Initial Primary General  Transaction ID: SB21B-2140 Date of Disbursement Initial Primary General  Transaction ID: SB21B-2140 Date of Disbursement Initial Primary General  Office Sought: House Senate Primary General  Office Sought: House Primary General			by any person for	or the purpose of soliciting contributions
Amy Greene  Mailing Address 1091 Clubhouse Drive  City State Investment Travel Expense Candidate Name  Office Sought: President Disbursement For: Senate Primary General Office Sought: President Disbursement For: Senate Primary General Office Sought: Primary General Office Sought: President Disbursement For: Senate Primary General Office Sought: Primary General Office S	NAME OF COMMITTEE (In Full)			
Mailing Address   1091 Clubhouse Drive   12   0.9   2.0.1.0	,			Date of Disbursement
Lake Isabella  Purpose of Disbursement Travel Expense  Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) Arny Greene  Mailing Address 1091 Clubhouse Drive  City Senate President Airline Baggage Fees Candidate Name  Office Sought: House Senate MI 48893  Office Sought: House President State: District:  Full Name (Last, First, Middle Initial) Amy Greene  Mailing Address 1091 Clubhouse Drive  City Senate President State: District:  Full Name (Last, First, Middle Initial) Amy Greene  Mailing Address 1091 Clubhouse Drive  City Senate President State: District:  Full Name (Last, First, Middle Initial) Amy Greene  Mailing Address 1091 Clubhouse Drive  City State Zip Code Ancount of Each Disbursement this Period  Transaction ID: SB21B-2139  Date of Disbursement The Period  Transaction ID: SB21B-2140  Date of Disbursement  Transaction ID: SB21B-2140  Date of Disbursement The Period  Amount of Each Disbursement this Period  Transaction ID: SB21B-2140  Date of Disbursement this Period  Transaction ID: SB21B-2139  Amount of Each Disbursement this Period  Transaction ID: SB21B-2139  Amount of Each Disbursement this Period  Transaction ID: SB21B-2139  Amount of Each Disbursement this Period  Transaction ID: SB21B-2139  Amount of Each Disbursement this Period  Transaction ID: SB21B-2139  Amount of Each Disbursement this Period  Transaction ID: SB21B-2139  Amount of Each Disbursement this Period  Transaction ID: SB21B-2139  Amount of Each Disbursement this Period	Mailing Address 1091 Clubhouse Drive			12 0 9 2 0 1 0
Travel Expense Candidate Name  Category/ Type  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) Amy Greene  Mailing Address 1091 Clubhouse Drive  City Lake Isabella Mil 48893  Office Sought: House Primary General Disbursement For: Senate Primary General Date of Disbursement  Arrine Baggage Fees Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Date of Disbursement  Arrine Baggage Fees Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate President State: District:  Full Name (Last, First, Middle Initial) Amy Greene  Mailing Address 1091 Clubhouse Drive  City Senate President  City Category/ Type  Office Sought: House Disbursement For: City Category Amount of Each Disbursement this Period  Date of Disbursement  Transaction ID: SB21B-2139  Amount of Each Disbursement  Transaction ID: SB21B-2140  Date of Disbursement  Transaction ID: SB21B-2140  Date of Disbursement  Transaction ID: SB21B-2140  Date of Disbursement  Transaction ID: SB21B-2139  Amount of Each Disbursement  Transaction ID: SB21B-2139  Amount of Each Disbursement  Transaction ID: SB21B-2139  Amount of Each Disbursement  Transaction ID: SB21B-2140  Date of Disbursement  Transaction ID: SB21B-2139  Amount of Each Disbursement  Transaction ID: SB21B-2139  Date of Disbursement  Transaction ID: SB21B-2139  Amount of Each Disbursement  Transaction ID: SB21B-2139  Amount of Each Disbursement this Period  Type  Office Sought: House Disbursement For: Primary General Disbursement  Travel & Subsistence Expense Reimb  Category/ Type  Office Sought: Primary General Other (specify) ▼  Office Sought: Primary General Other (specify) ▼  Office Sought: Primary General Other (specify) ▼	•			Amount of Each Disbursement this Period
Candidate Name  Category/ Type  Office Sought:	Purpose of Disbursement			70.68
Office Sought:				
Full Name (Last, First, Middle Initial) Amy Greene  Mailing Address 1091 Clubhouse Drive  City State Zip Code MI 48893  Purpose of Disbursement Airline Baggage Fees Candidate Name  Other (specify) ▼  City Senate Primary General Other (specify) ▼  City State Zip Code Amount of Each Disbursement Initial) Amy Greene  Mailing Address 1091 Clubhouse Drive  City State Zip Code Amount of Each Disbursement Initial) Amy Greene  Mailing Address 1091 Clubhouse Drive  City State Zip Code MI 48893  Purpose of Disbursement Initial) Amy Greene  City State Zip Code MI 48893  Category/ Type  City State Subsistence Expense Reimb  Candidate Name  Category/ Type  Office Sought: House Disbursement For: Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  Office Sought: Primary General Other (specify) ▼	Senate President	Primary General	7,	
Amy Greene  Mailing Address 1091 Clubhouse Drive  City State Zip Code MI 48893  Purpose of Disbursement House Disbursement For:  Senate Primary General District:  Full Name (Last, First, Middle Initial)  Amy Greene  Mailing Address 1091 Clubhouse Drive  City State Zip Code MI 48893  Transaction ID: SB21B-2140  Date of Disbursement this Period  Transaction ID: SB21B-2140  Date of Disbursement Tor:  Date of Disbursement ID: SB21B-2140  Date of Disbursement Tor:  Mailing Address 1091 Clubhouse Drive  City State Zip Code MI 48893  Purpose of Disbursement Tor:  City Lake Isabella State Zip Code MI 48893  Purpose of Disbursement Tor:  Category/ Type  Office Sought: House Disbursement For:  Senate Primary General Disbursement Tor:  Senate Primary General Disbursement For:  Senate Primary General Disbursement For:  Senate Primary General Disbursement For:  Office Sought: House Disbursement For:  Senate Primary General Disbursement For:  Office Sought: President Disbursement For:  Office Sought: President Disbursement For:  Senate Primary General Disbursement For:  Office Sought: President Disbursement For:  Offi				Transaction ID: CD01D 0100
City	•			
Lake Isabella  Purpose of Disbursement Airline Baggage Fees  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Amy Greene  Mailing Address 1091 Clubhouse Drive  Transaction ID: SB21B-2140 Date of Disbursement  Mi 48893  Transaction ID: SB21B-2140 Date of Disbursement  Mi 48893  Purpose of Disbursement  Travel & Subsistence Expense Reimb  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  Office Sought: Primary General Other (specify) ▼				
Lake Isabella  Purpose of Disbursement Airline Baggage Fees  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Amy Greene  Mailing Address 1091 Clubhouse Drive  Transaction ID: SB21B-2140 Date of Disbursement  Mi 48893  Transaction ID: SB21B-2140 Date of Disbursement  Mi 48893  Purpose of Disbursement  Travel & Subsistence Expense Reimb  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  Office Sought: Primary General Other (specify) ▼	City	State Zin Code		Amount of Each Dishursement this Period
Airline Baggage Fees  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) Amy Greene  Mailling Address 1091 Clubhouse Drive  City State Zip Code Lake Isabella MI 48893  Purpose of Disbursement  Travel & Subsistence Expense Reimb  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  Other (specify) ▼	•			Amount of Each Disbursement this 1 chod
Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) Amy Greene  Mailing Address 1091 Clubhouse Drive  City State Zip Code Lake Isabella MI 48893  Purpose of Disbursement Travel & Subsistence Expense Reimb  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Office Sought: Primary General Other (specify) ▼  Other (specify) ▼  Category/ Type				12.65
Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) Amy Greene  Mailing Address 1091 Clubhouse Drive  City Lake Isabella MI 48893  Purpose of Disbursement Travel & Subsistence Expense Reimb  Candidate Name  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  Office Sought: President Disbursement For: General Other (specify) ▼				
Full Name (Last, First, Middle Initial) Amy Greene  Mailing Address 1091 Clubhouse Drive  City State Zip Code Lake Isabella MI 48893  Purpose of Disbursement Travel & Subsistence Expense Reimb  Candidate Name  Disbursement For: Senate Primary General Other (specify)  Office Sought: Transaction ID: SB21B-2140 Date of Disbursement  M2 M / D 0 D / Y 2 0 1 0 Y  Amount of Each Disbursement this Period  Category/ Type  Office Sought: Primary General Other (specify)  Other (specify)	Senate President	Primary General	Турс	
Amy Greene  Mailing Address 1091 Clubhouse Drive  City State Zip Code Lake Isabella  Purpose of Disbursement  Travel & Subsistence Expense Reimb  Candidate Name  Disbursement For:  Senate  Primary  General  President  Date of Disbursement  M 2 M / D D D / Y 2 0 1 0 Y  Amount of Each Disbursement this Period  Category/ Type  Office Sought:  Disbursement For:  Senate  Primary  General  Other (specify)				
City State Zip Code Lake Isabella MI 48893  Purpose of Disbursement Travel & Subsistence Expense Reimb  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) Total General Other	,			Date of Disbursement
Lake Isabella MI 48893  Purpose of Disbursement Travel & Subsistence Expense Reimb  Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼	Mailing Address 1091 Clubhouse Drive			12 0 9 7 2 0 1 0
Travel & Subsistence Expense Reimb  Candidate Name  Category/ Type  Office Sought: Disbursement For: Senate Primary General President Other (specify) ▼				Amount of Each Disbursement this Period
Candidate Name  Category/ Type  Office Sought:  Disbursement For:  Senate Primary General Other (specify)				199.65
Office Sought:  Senate President  Disbursement For:  General  Other (specify) ▼	·			
	Senate	Primary General	і уре	
		Other (Specify)		
	<b>SUBTOTAL</b> of Disbursements This Page (optional) .		<u> </u>	282.98

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

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ige# 11990129017			
SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only 21b 27	
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name		y any person fo	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	TRAVEL OFFSET ACCO	UNT	
Full Name (Last, First, Middle Initial)  Monica Lee			Transaction ID: SB21B-2141 Date of Disbursement
Mailing Address 8618 Modesto Court			12 0 1 0
City Indianapolis	State Zip Code IN 46278		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name  Office Sought: House Disburs Senate	ement For: Primary General	Category/ Type	800.00
State: President  District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)  Jesse Lewin			Transaction ID: SB21B-2142 Date of Disbursement  M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3100 N Street, NW, #3			12 09 2010
City Washington	State Zip Code DC 20007		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		•	132.00
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial) Jesse Lewin			Transaction ID: SB21B-2143 Date of Disbursement
Mailing Address 3100 N Street, NW, #3			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 9 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Washington	State Zip Code DC 20007		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			448.00
Candidate Name	-	Category/ Type	
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)		
State: District:			
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	1380.00

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SCHEDULE B (FEC Form 3X)		FOR LINE N	NUMBER: PAGE 163 / 260
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		by any person fo	r the purpose of soliciting contributions
<ul> <li>NAME OF COMMITTEE (In Full)</li> </ul>	and address of any political c	committee to some	cit contributions from such confinitee
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCC	DUNT	
Full Name (Last, First, Middle Initial) Nicole Lynch			Transaction ID: SB21B-2144 Date of Disbursement
Mailing Address 7 Avenue A, 2nd Floor			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 12 & \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 9 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix}$
	State Zip Code NY 10009		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			800.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	· ·		
Full Name (Last, First, Middle Initial) Michael McSwain			<b>Transaction ID:</b> SB21B-2145  Date of Disbursement
Mailing Address 1427 College Avenue			$\begin{bmatrix} \begin{smallmatrix} M \\ 12 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix}$
,	State Zip Code NC 28152		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			50.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			ODO4D 0440
Michael McSwain			Transaction ID: SB21B-2146 Date of Disbursement
Mailing Address 1427 College Avenue			$\begin{bmatrix} 1 & 2 & 1 \\ 1 & 2 & 1 \end{bmatrix} \begin{bmatrix} 1 & 0 & 0 \\ 0 & 0 & 0 \end{bmatrix} \begin{bmatrix} 1 & 0 & 0 \\ 0 & 0 & 1 \end{bmatrix} \begin{bmatrix} 1 & 0 & 0 \\ 0 & 0 & 1 \end{bmatrix}$
	State Zip Code NC 28152		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			800.00
Candidate Name		Category/	
Office Sought: House Disburse Senate	ment For: Primary General	Туре	
President State: District:	Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional) .			1650.00

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	
		27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCC	DUNT	
Full Name (Last, First, Middle Initial) Kathryn Minor			Transaction ID: SB21B-2147 Date of Disbursement
Mailing Address 1323 28th Street, NW			12 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	State Zip Code DC 20007		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			9.77
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)	,,	
State: District: Full Name (Last, First, Middle Initial)			
Kathryn Minor			Transaction ID: SB21B-2148 Date of Disbursement
Mailing Address 1323 28th Street, NW			$\begin{bmatrix} 1 & 2 & M & M & M & M & M & M & M & M & M$
	State Zip Code DC 20007		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			52.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Kathryn Minor			Transaction ID: SB21B-2149 Date of Disbursement
Mailing Address 1323 28th Street, NW			$\begin{bmatrix} 1 & 2 & 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 &$
	State Zip Code DC 20007		Amount of Each Disbursement this Period
Purpose of Disbursement			800.00
Travel & Subsistence Expense Reimb  Candidate Name		Category/	
		Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	Outidi (apeoliy)		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	861.77

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ago,, 11000120020			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	one)
	Detailed Summary Page	27	22
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	DUNT	
Full Name (Last, First, Middle Initial) Julia Moseley			Date of Disbursement
Mailing Address 1245 13th Street, NW, #5	14		12 M 7 D 9 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	State Zip Code DC 20005		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			183.53
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Julia Moseley			Date of Disbursement
Mailing Address 1245 13th Street, NW, #5	14		
	State Zip Code DC 20005		
Purpose of Disbursement Travel & Subsistence Expense Reimb		· · · ·	448.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼		
State: District: Full Name (Last, First, Middle Initial)			
Kathleen Nowak			Date of Disbursement
Mailing Address 909 New Jersey Avenue,	SE, #507		12 10 9 1 2 0 1 0
	State Zip Code DC 20003		
Purpose of Disbursement Travel Expense			20.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	.,,,,,	
State: District:	onici (apooliy) ♥		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	651.53

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

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 166 / 260
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 23	24 25 26 28c 29 30b
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)	and address of any pointed			
DEMOCRATIC NATIONAL COMMITTEE	TRAVEL OFFSET ACC	OUNT		
Full Name (Last, First, Middle Initial) Kathleen Nowak			Transaction ID: SI Date of Disbursemen	
Mailing Address 909 New Jersey Avenue	SE, #507		12 09	y yo yo
City Washington	State Zip Code DC 20003		Amount of Each Disk	oursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb				800.00
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)			
Full Name (Last, First, Middle Initial)			Transaction ID: S	R21R-215/
Brendan Olsen			Date of Disbursemen	nt
Mailing Address 20 Baltic Avenue			12 09	Y 2010
City North Easton	State Zip Code MA 02356		Amount of Each Disk	oursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		•		700.00
Candidate Name		Category/ Type		
Senate President	ement For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) Emily Petty			Transaction ID: SI Date of Disbursemer	nt
Mailing Address 811 4th Street, NW, #60	1		12 0 9	2010
City Washington	State Zip Code DC 20001		Amount of Each Disk	oursement this Period
Purpose of Disbursement Travel Expense				48.86
Candidate Name		Category/ Type		
Senate President	ement For: Primary General Other (specify)	. 75-2		
State: District:				
SUBTOTAL of Disbursements This Page (optional)				1548.86

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SCHEDULE B (FEC Form 3X)		arate schedule(s)			OR LIN		R:			PA	GE	167 /	260	_
ITEMIZED DISBURSEMENTS		category of the Summary Page		_	21b 27	22 28a		23 28b	2	1 Вс	П	25 29	$\square$	26 80b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name													5	
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL	OFFSET ACC	NUO	Ŋ.	Γ									
Full Name (Last, First, Middle Initial) Emily Petty								isburse	ement	21B			Y	
Mailing Address 811 4th Street, NW, #601						1 <sup>M</sup> 2		0	9 /	L	2	οťα	)	
•	State DC	Zip Code 20001				Amou	nt o	f Each	Disbu	rser	-			7
Purpose of Disbursement Travel & Subsistence Expense Reimb				•			-				4	48.00	-	_
Candidate Name					egory/ /pe									
Office Sought: House Disburser Senate President	ment For: Primary Other (spe	General ecify) ▼												
State: District: Full Name (Last, First, Middle Initial)						Trans	acti	on ID:	SB	)1R	-21	57		
MATHEWS PIERSON						Date o		isburse	ement	Y			Υ	
Mailing Address 70   Street, SE, #713						12		0	9	L	2	0 i c	)	
•	State DC	Zip Code 20003				Amou	nt o	f Each	Disbu	rser	nen	this F	Period	_
Purpose of Disbursement Travel Expense			Г									42.77		_
Candidate Name					egory/ /pe									
Office Sought: House Disburser Senate President State: District:	ment For: Primary Other (spe	General ecify) ▼												
Full Name (Last, First, Middle Initial) MATHEWS PIERSON						Trans		on ID:		21B	-21	58		
Mailing Address 70   Street, SE, #713						12	М	0	9 /	Y	ž	0 ť c	Y	
	State DC	Zip Code 20003				Amou	nt o	f Each	Disbu	rser	nen	this F	Period	_
Purpose of Disbursement Travel & Subsistence Expense Reimb			Г								.80	00.00		_
Candidate Name					egory/ /pe									
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General			, pc									
State: District:	\- I= .	<i>→</i> , <del>↓</del>												_
SUBTOTAL of Disbursements This Page (optional)					. •						129	0.77		1

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ago# 11000120020			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	
		27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCC	DUNT	
Full Name (Last, First, Middle Initial) Elisabeth Reiter			Transaction ID: SB21B-2159 Date of Disbursement
Mailing Address 5 16th Street, NE			12 M 7 D 9 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
•	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			30.60
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
Elisabeth Reiter			Transaction ID: SB21B-2160 Date of Disbursement
Mailing Address 5 16th Street, NE			$\begin{bmatrix}\begin{smallmatrix}M\\1\end{smallmatrix}2^{M}\end{smallmatrix}]^{M} \begin{bmatrix}\begin{smallmatrix}D\\0\end{smallmatrix}9^{D}\end{smallmatrix}]^{M} \begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y\\2\end{smallmatrix}0^{Y}1^{O}\end{smallmatrix}$
	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement		· · ·	392.00
Travel & Subsistence Expense Reimb Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)	.,,,,,	
State: District: Full Name (Last, First, Middle Initial)			
IAN ROSE			Transaction ID: SB21B-2161 Date of Disbursement
Mailing Address 147 D Street, SE			$\begin{bmatrix} 1 & 2 & M \\ 1 & 2 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 0 \end{bmatrix} / \begin{bmatrix} 0 & 0 & 1 \\ 0 & 2 & 0 & 1 \\ 0 & 0 & 0 \end{bmatrix}$
	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			102.38
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	Carol (openiy) ¥		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	524.98

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

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	NE NUMBER: PAGE 169 / 260							
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check or X 21b 27	22 2	3 8b	24 28c	25 29	26		
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)  DEMOCRATIC NATIONAL COMMITTEE -	and address of any political col	mmittee to s							
	——————————————————————————————————————	JIN I							
Full Name (Last, First, Middle Initial) IAN ROSE			Transaction Date of Disk	oursem	ent				
Mailing Address 147 D Street, SE			12 /	0 9	/ Y	ž 0 1	0 <sup>Y</sup>		
	State Zip Code DC 20003		Amount of E	ach Di	sburse	ment this	Period		
Purpose of Disbursement Travel & Subsistence Expense Reimb			L			700.0	0		
Candidate Name		Category/ Type							
Office Sought: House Senate President State: District:	nent For: Primary General Other (specify)								
Full Name (Last, First, Middle Initial) TIMOTHY SNEED			Transaction Date of Disk		_	3-2163			
Mailing Address 101 S. WHITING STREE	Γ, #808		1 2 M	09	/ Y	ž o ť	0 <sup>Y</sup>		
	State Zip Code VA 22304		Amount of E	ach Di	sburse	ment this	Period		
Purpose of Disbursement Travel Expense		•				102.2	3		
Candidate Name		Category/ Type							
Office Sought: House Senate President State: District:	nent For: Primary General Other (specify)								
Full Name (Last, First, Middle Initial) TIMOTHY SNEED			Transaction Date of Disk		_	3-2164			
Mailing Address 101 S. WHITING STREE	Γ, #808		12 M	0 9	/ Y	žoť	0 <sup>Y</sup>		
	State Zip Code VA 22304		Amount of E	ach Di	sburse	ment this	Period		
Purpose of Disbursement Travel & Subsistence Expense Reimb						800.0	0		
Candidate Name		Category/ Type							
Office Sought: House Senate President State: District:	ment For: Primary General Other (specify) ▼								
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>				1602.2	3		
TOTAL This Period (last page this line number only)		<b>&gt;</b>	FEC Sch						

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SCHEDULE B (FEC Form 3X)			DAGE 470 (000
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	
ITEMIZED DISBURSEMENTS	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2165
Avra Stackpole			Date of Disbursement
Mailing Address 7200 Nathaniel Lane			$\begin{bmatrix} 1 & 2 & M & M & M & M & M & M & M & M & M$
City McLean	State Zip Code VA 22101		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees		-	25.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	Туре	
State: District:	- a (spee))   <b>\</b>		
Full Name (Last, First, Middle Initial) Avra Stackpole			Transaction ID: SB21B-2166 Date of Disbursement
Mailing Address 7200 Nathaniel Lane			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City McLean	State Zip Code VA 22101		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			800.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Maju Varghese			<b>Transaction ID:</b> SB21B-2167 Date of Disbursement
Mailing Address 70-60 260th Street			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 9 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Glen Oaks	State Zip Code NY 11004		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			700.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For:  Primary  Other (specify)	75-2	
State: District:	- · · · · · · ·		
SURTOTAL of Dishursements This Page (optional)			1525.00

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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 171 / 260
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
/			
Full Name (Last, First, Middle Initial) David Wilcox			Transaction ID: SB21B-2168 Date of Disbursement
Mailing Address 2062 Tecumseh Road			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & Z \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & D \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & O \end{smallmatrix} \end{bmatrix}$
City Manhattan	State Zip Code KS 66502		Amount of Each Disbursement this Period
Purpose of Disbursement Events-Site Supplies			31.05
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) David Wilcox			Transaction ID: SB21B-2169 Date of Disbursement
Mailing Address 2062 Tecumseh Road			$\begin{bmatrix} 1 & 2 & M \\ 1 & 2 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 0 \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 2 & 0 & 1 \\ 0 & 0 & 0 \end{bmatrix}$
City Manhattan	State Zip Code KS 66502		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			67.09
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) David Wilcox			Transaction ID: SB21B-2170 Date of Disbursement
Mailing Address 2062 Tecumseh Road			12 M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Manhattan	State Zip Code KS 66502		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			50.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	· ·		
SURTOTAL of Dishursements This Page (ontional)			148.14

В.

C.

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

FOR LINE NUMBER: PAGE 172 / 260 Use separate schedule(s) (check only one) for each category of the 21b 22 23 24 25 26 Detailed Summary Page 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-2171 David Wilcox Date of Disbursement 0 9 **1** 2 2010 Mailing Address 2062 Tecumseh Road City State Zip Code Amount of Each Disbursement this Period KS 66502 Manhattan 800.00 Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name Category/ Type Office Sought: House Disbursement For: General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-2172 ANDREW BALLARD Date of Disbursement 13 2010 Mailing Address 210 M Street, SW City State Zip Code Amount of Each Disbursement this Period Washington 20024 DC 600.00 Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-2173 **DESIREE BARNES** Date of Disbursement 2010 Mailing Address 199 Lorifield Drive City State Zip Code Amount of Each Disbursement this Period Amherst NY 14226 700.00 Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: 2100.00

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

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

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		by any person f	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -			
Full Name (Last, First, Middle Initial) Stephen Barrows			Transaction ID: SB21B-2174 Date of Disbursement
Mailing Address 909 at Capitol Yards 909 New Jersey Ave., SE	. #1201		12 M / D 3 / Y 2010 Y
City	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			800.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Mary Baskerville			Transaction ID: SB21B-2175 Date of Disbursement
Mailing Address 6656 Corner Lane			$ \begin{bmatrix} M & M \\ 1 & 2 \end{bmatrix} \begin{bmatrix} D & D & D \\ 1 & 3 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $
,	State Zip Code VA 22101		Amount of Each Disbursement this Period
Purpose of Disbursement Events-Site Supplies			38.31
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Mary Baskerville			Transaction ID: SB21B-2176 Date of Disbursement
Mailing Address 6656 Corner Lane			$\begin{bmatrix} M & M \\ 1 & 2 \end{bmatrix} & \begin{bmatrix} D & D \\ 1 & 3 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	State Zip Code VA 22101		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			4.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	(- <b> </b>		
SUBTOTAL of Disbursements This Page (optional) .		<b></b>	842.31

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

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CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	
y Information copied from such Reports and Staten		27	28a 28b 28c 29 3
for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCOU	JNT	
Full Name (Last, First, Middle Initial) Mary Baskerville			Transaction ID: SB21B-2177 Date of Disbursement
Mailing Address 6656 Corner Lane			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix}$
City McLean	State Zip Code VA 22101		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			800.00
Candidate Name		Category/ Type	
Senate President	ement For:  Primary  General  Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: CD01D 0170
BRADLEY BECNEL			Transaction ID: SB21B-2178 Date of Disbursement
Mailing Address 1133 14th Street, NW, U	nit 509		12 M 13 V 2010 Y
City Washington	State Zip Code DC 20005		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb	Г	•	568.00
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)	1,500	
State: District: Full Name (Last, First, Middle Initial)			- " - DOMP 0470
Nicole Black			Transaction ID: SB21B-2179 Date of Disbursement
Mailing Address 6424 Fairbanks Street			$\begin{bmatrix}\begin{smallmatrix}M&M\\1^2&M\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&1^2&3\\1^3&3\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y&Y\\2^2&0^1&0\end{smallmatrix}\end{bmatrix}$
City New Carrollton	State Zip Code MD 20784		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb	Г	•	700.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	Ni	
State: District:			

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ugo,, 11000120000			
SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b	22 23 24 25 26
Any Information copied from such Reports and Statem	ents may not be sold or used	by any person f	28a 28b 28c 29 30b
or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	DUNT	
Full Name (Last, First, Middle Initial) Miriam S. Briskman			Transaction ID: SB21B-2180 Date of Disbursement
Mailing Address 1209 7th Street, NW, Apt	303		12 M / D B / Y Y Y O Y O Y
,	State Zip Code DC 20001		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			39.48
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial) Miriam S. Briskman			Transaction ID: SB21B-2181 Date of Disbursement
Mailing Address 1209 7th Street, NW, Apt	303		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 3 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
,	State Zip Code DC 20001		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			25.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Miriam S. Briskman			Transaction ID: SB21B-2182 Date of Disbursement
Mailing Address 1209 7th Street, NW, Apt	303		$\begin{bmatrix} M & M \\ 1 & 2 \end{bmatrix} & \begin{bmatrix} D & D \\ 1 & 3 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	State Zip Code DC 20001		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		0 0	700.00
Candidate Name		Category/	
Senate	ment For: Primary General	Туре	
State: President State:	Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	764.48

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

В.

C.

SCHEDULE B (FEC Form 3X)	Han annual colonia (A)	FOR LINE N	NUMBER: PAGE 176 / 260
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
_	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name	nents may not be sold or used	by any person fo	or the purpose of soliciting contributions
or for commercial purposes, other than using the name  NAME OF COMMITTEE (In Full)	e and address of any political	Committee to soll	CIL CONTINUUIONS FROM SUCH COMMITTEE
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2183
Aimee Jasculca			Date of Disbursement
Mailing Address 808 Columbus Ave., Apt	22A		12 13 7 2010
,	State Zip Code NY 10025		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			800.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	71	
State: District:	(-  ), <b>\</b>		
Full Name (Last, First, Middle Initial) Katherine Lillie			Transaction ID: SB21B-2184 Date of Disbursement
Mailing Address 1840 13th Street, NW			12 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement		-	568.00
Travel & Subsistence Expense Reimb  Candidate Name		Category/ Type	
Office Sought:    House   Disburse     Senate   President     State: District:	ement For: Primary General Other (specify)	.,,,,,	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2185
Joshua Lipsky			Date of Disbursement
Mailing Address 1638 19th Street, NW			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix}$
	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement Events-Site Supplies		0 0	68.80
Candidate Name		Category/	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	Туре	
State: District:			
SUBTOTAL of Disbursements This Page (optional) .			1436.80

В.

C.

SCHEDULE B (FEC Form 3X)		FOR LINE N	NUMBER: PAGE 177 / 260
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
TEMPLE BIODOTICEMENTO	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Staten		by any person fo	r the purpose of soliciting contributions
or for commercial purposes, other than using the nam	e and address of any political	committee to solid	cit contributions from such committee
NAME OF COMMITTEE (In Full)  DEMOCRATIC NATIONAL COMMITTEE -	TDAVEL OFFCET ACC	OLINT	
DEMOCRATIC NATIONAL COMMITTEE	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2186
Joshua Lipsky			Date of Disbursement
Mailing Address 1638 19th Street, NW			
City Washington	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement	20000		50.00
Airline Baggage Fees			
Candidate Name		Category/ Type	
Office Sought: House Disburse	ement For:	7.	
Senate President	Primary General		
State: District:	Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2187
Joshua Lipsky			Date of Disbursement
Mailing Address 1638 19th Street, NW			12 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code		Amount of Each Disbursement this Period
Washington	DC 20009		568.00
Purpose of Disbursement Travel & Subsistence Expense Reimb			000.00
Candidate Name		Category/ Type	
ÿ	ement For:		
Senate   President	Primary General Other (specify)		
State: District:	(-p ), <b>\</b>		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2188
Carly Montoya			Date of Disbursement
Mailing Address 1330 South Fair Street, A	Apt 302		M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Arlington	State Zip Code VA 22202		Amount of Each Disbursement this Period
Purpose of Disbursement			568.00
Travel & Subsistence Expense Reimb  Candidate Name		Category/	
		Type	
	ement For:		
Senate President	Primary General Other (specify)		
State: District:	(spoon)/ <b>\</b>		
SUBTOTAL of Disbursements This Page (optional)		•	1186.00

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	NUMBER:	PAGE 178 / 260
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b	one) 22 23 2	24 25 26
Any Information copied from such Reports and State	ments may not be sold or used	by any person for	28a 28b	28c 29 30b
or for commercial purposes, other than using the nan				
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACC	OUNT		
Full Name (Last, First, Middle Initial) Jaime Moore			Transaction ID: S	
Mailing Address 1451 Walz Avenue			12 <sup>M</sup> 13	Y 2010 Y
City Glenwood Springs	State Zip Code CO 81601		Amount of Each Dis	sbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb				800.00
Candidate Name		Category/ Type		
Office Sought:  Senate President State:  Disburs  Senate	ement For: Primary General Other (specify)			
Full Name (Last, First, Middle Initial) SARAH MOSS			Transaction ID: S	
Mailing Address 550 E. 12TH AVENUE #	501		Date of Disburseme	/ Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code		Amount of Each Dis	sbursement this Period
Denver Purpose of Disbursement	CO 80203			67.39
Events-Site Supplies				
Candidate Name		Category/ Type		
Senate President	ement For:  Primary General  Other (specify) ▼			
State: District: Full Name (Last, First, Middle Initial)				
SARAH MOSS			Transaction ID: S Date of Disburseme	ent
Mailing Address 550 E. 12TH AVENUE #	501		12 / D 3	y žo jo
City Denver	State Zip Code CO 80203		Amount of Each Dis	sbursement this Period
Purpose of Disbursement Travel Expense				41.30
Candidate Name		Category/ Type		
Senate President	ement For: Primary General Other (specify)			
State: District:				
SUBTOTAL of Disbursements This Page (optional)				908.69

В.

C.

SCHEDULE B (FEC Form 3X)		FOR LINE N	NUMBER: PAGE 179/260
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Stater		d by any person fo	r the purpose of soliciting contributions
or for commercial purposes, other than using the name	e and address of any political	committee to soli	cit contributions from such committee
NAME OF COMMITTEE (In Full)  DEMOCRATIC NATIONAL COMMITTEE :	TRAVEL OFFSET ACC	OUNT	
/ 			
Full Name (Last, First, Middle Initial) SARAH MOSS			Transaction ID: SB21B-2192 Date of Disbursement
Mailing Address 550 E. 12TH AVENUE #	501		$\begin{bmatrix} 1 & 2 & M \\ 1 & 2 & M \end{bmatrix} / \begin{bmatrix} D & 1 & 3 \\ 1 & 3 & M \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
City Denver	State Zip Code CO 80203		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			800.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For:  Primary General  Other (specify)		
State: District:	·		
Full Name (Last, First, Middle Initial) MATHEWS PIERSON			Transaction ID: SB21B-2193 Date of Disbursement
Mailing Address 70 I Street, SE, #713			$\begin{bmatrix} 1 & 2 & M \\ 1 & 2 & M \end{bmatrix} / \begin{bmatrix} 1 & 1 & 3 \\ 1 & 3 & M \end{bmatrix} / \begin{bmatrix} 1 & 1 & 1 & 1 \\ 1 & 2 & 1 & 1 & 1 \end{bmatrix}$
City Washington	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			6.24
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) MATHEWS PIERSON			Transaction ID: SB21B-2194 Date of Disbursement
Mailing Address 70 I Street, SE, #713			12
City Washington	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			700.00
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President	ement For:  Primary  Other (specify)	X1.5	
State: District:			
SUBTOTAL of Disbursements This Page (optional)			1506.24

В.

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)			NE NUMBER: PAGE 180 / 260 only one)							260
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 21b 27	22		23 28l	b	24 28c		25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name											5
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUN	ЛТ								
Full Name (Last, First, Middle Initial) Evelyn Marie Prentice  Mailing Address 634 Kling Street, Apt A				Da	ate c	of Disbu	rse	SB21		195 0 1 (	) <sup>Y</sup>
	State Zip Code					nt of Ea		Disburse			
Akron	OH 44311			- Г		•	-	•		74.00	
Purpose of Disbursement Travel Expense						-	-			7 1100	
Candidate Name			itegory/ Γype								
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)										
Full Name (Last, First, Middle Initial)				Tra	ans	action	ID:	SB21	B-21	196	
Evelyn Marie Prentice				Da	ate c	of Disbu	irse	ement			V.
Mailing Address 634 Kling Street, Apt A					2	M /	1	3 /	Ž	010	)
•	State Zip Code OH 44311			Ar	nou	nt of Ea	ch	Disburse	emer	t this I	Period
Purpose of Disbursement Travel & Subsistence Expense Reimb									.8	00.00	)
Candidate Name			itegory/ Type								
Office Sought:  Senate President State:  Disburse	ement For: Primary General Other (specify)										
Full Name (Last, First, Middle Initial)				Tr	ans	action	ID:	SB21	R-2	197	
Natalie Reese				Da	ate c	of Disbu	rse	ement			
Mailing Address 2930 Newark Street, NW	,			1	2	M /	1	3 /	Ž	0 1 (	)
	State Zip Code DC 20008			Ar	nou	nt of Ea	ch	Disburse	emer	t this I	Period
Purpose of Disbursement Travel & Subsistence Expense Reimb					_	-	_		8	00.00	)
Candidate Name			itegory/ Type								
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)										
State: District:	- ·										
SUBTOTAL of Disbursements This Page (optional)			<b>&gt;</b>						16	74.00	

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)				BER:		P	AGE	181 /	260
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	1 –	21b 27	22	<u>,</u> [	23 28b	24 28c	П	25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			y persor	n for the	purpo	se of s	oliciting c		utions	
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	COUN	Т							
Full Name (Last, First, Middle Initial) Angela Tennison  Mailing Address 1807 8th Street, NW, April	t 2				e of D	isburs	SB21 ement		98 0 1 0	Y
	State Zip Code DC 20001			Am	ount c	of Each	Disburse	-		-
Purpose of Disbursement Events-Site Supplies Candidate Name			egory/					. 2	26.84	
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)	<u> </u>	ype							
Full Name (Last, First, Middle Initial) Angela Tennison  Mailing Address 1807 8th Street, NW, Apr	12				e of D	isburs	SB21 ement		99 0 ť 0	Y
,	State Zip Code DC 20001			Am	ount o	of Each	Disburse	ement	this F	Period
Purpose of Disbursement Travel Expense Candidate Name			egory/					1	8.00	
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify) ▼	<u> </u>	уре							
Full Name (Last, First, Middle Initial) Angela Tennison						ion ID:	: SB21 ement	B-22(	00	
Mailing Address 1807 8th Street, NW, Apr	12			1 <sup>M</sup>	2 <sup>M</sup>	/ D 1	<b>3</b> /	ž	0 ť 0	Y
Washington	State Zip Code DC 20001			Am	ount o	of Each	Disburse	-		
Purpose of Disbursement Airline Baggage Fees Candidate Name			egory/				•		50.00	
Senate President	ment For: Primary General Other (specify)									
State: District:					•	v		-		
SUBTOTAL of Disbursements This Page (optional) .			. <b>&gt;</b>					. 9	4.84	

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s) (checks			PAGE 182 / 260			
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 23	24 25 26 28c 29 30b			
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		d by any person fo	or the purpose of soliciti	ng contributions			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT					
Full Name (Last, First, Middle Initial) Angela Tennison			Transaction ID: SE	-			
Mailing Address 1807 8th Street, NW, Ap	2		$\begin{bmatrix} 1 & 2 & 1 & 3 \end{bmatrix}$	2010			
City Washington	State Zip Code DC 20001		Amount of Each Disb	oursement this Period			
Purpose of Disbursement Travel & Subsistence Expense Reimb		_ ` ` `		568.00			
Candidate Name		Category/ Type					
Senate President	ment For: Primary General Other (specify)						
State: District:							
Full Name (Last, First, Middle Initial) Susan Watson			Transaction ID: SE Date of Disbursemen	t			
Mailing Address 16362 North Hawthorne	Lane		12 13	Ž O Ĭ O Š			
City Mount Vernon	State Zip Code IL 62864		Amount of Each Disb				
Purpose of Disbursement Travel & Subsistence Expense Reimb		•		700.00			
Candidate Name		Category/ Type					
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼						
State: District:							
Full Name (Last, First, Middle Initial) ALEX BAKER			Transaction ID: SE Date of Disbursemen	t			
Mailing Address 1474 Columbia Rd., NW	, Apt 311		12 14	2010			
City Washington	State Zip Code DC 20009		Amount of Each Disb	oursement this Period			
Purpose of Disbursement Airline Baggage Fees				50.00			
Candidate Name		Category/ Type					
Senate President	ment For: Primary General Other (specify)						
State: District:							
SURTOTAL of Dishursements This Page (ontional)				1318.00			

A.

В.

C.

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

FOR LINE NUMBER: PAGE 183 / 260 Use separate schedule(s) (check only one) for each category of the 21b 22 23 24 25 26 Detailed Summary Page 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-2204 ALEX BAKER Date of Disbursement 4 2010 Mailing Address 1474 Columbia Rd., NW, Apt 311 City State Zip Code Amount of Each Disbursement this Period Washington DC 20009 700.00 Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-2205 Nicole Black Date of Disbursement 14 2010 Mailing Address 6424 Fairbanks Street City State Zip Code Amount of Each Disbursement this Period New Carrollton 20784 MD 35.00 Purpose of Disbursement Travel Expense Candidate Name Category/ Туре Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-2206 Nicole Black Date of Disbursement 2010 Mailing Address 6424 Fairbanks Street City State Zip Code Amount of Each Disbursement this Period **New Carrollton** MD 20784 50.00 Purpose of Disbursement Airline Baggage Fees Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: 785.00 SUBTOTAL of Disbursements This Page (optional) ...  $\blacktriangleright$ 

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

C.

age# 11990129039			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE I (check only X 21b	
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam		by any person fo	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	UNT	
Full Name (Last, First, Middle Initial) Nicole Black			Transaction ID: SB21B-2207 Date of Disbursement
Mailing Address 6424 Fairbanks Street			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City New Carrollton	State Zip Code MD 20784		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name		Category/ Type	700.00
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)	Турс	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2208
Miriam S. Briskman  Mailing Address 1209 7th Street, NW, Ap	t 303		Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington	State Zip Code DC 20001		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense Candidate Name		Category/	85.00
		Type	
Senate President	ement For:  Primary General  Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: CD01D 0000
Miriam S. Briskman			Transaction ID: SB21B-2209 Date of Disbursement
Mailing Address 1209 7th Street, NW, Ap	t 303		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & 1 & 0 \\ 1 & 4 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Washington	State Zip Code DC 20001		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			700.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	71	
State: District:	- \-i // <b>V</b>		
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	1485.00

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

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 185 / 260
ITEMIZED DISBURSEMENTS	for each category of the	(check only		24
	Detailed Summary Page	27		28c 29 30b
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT		
Full Name (Last, First, Middle Initial)			Transaction ID: S	 B21B-2210
Anna Brower			Date of Disbursemen	-
Mailing Address 1255 Severn Court			12 14	2010
City Ann Arbor	State Zip Code MI 48105		Amount of Each Disk	oursement this Period
Purpose of Disbursement Travel Expense				42.00
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) Anna Brower			Transaction ID: SI Date of Disbursemen	
Mailing Address 1255 Severn Court			12 14	2010
City Ann Arbor	State Zip Code MI 48105		Amount of Each Disk	
Purpose of Disbursement				25.00
Airline Baggage Fees Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	. 100		
State: District:	•			
Full Name (Last, First, Middle Initial) Anna Brower			Transaction ID: SE Date of Disbursemen	
Mailing Address 1255 Severn Court			12 M 1 4	2010
City Ann Arbor	State Zip Code MI 48105		Amount of Each Disk	oursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			Ĺ	700.00
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)			
State: District:				
SURTOTAL of Dishursements This Page (optional)				767.00

C.

SCHEDULE B (FEC Form 3X)	Lias asperato aspedula(a)	FOR LINE	NUMBER: PAGE 186 / 260
ITEMIZED DISBURSEMENTS	SBURSEMENTS   Ose separate scriedule(s)   (check		vone) 7 22
	Detailed Summary Page	27	28a 28b 28c 29 30k
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2213
Matthew Cavanaugh			Date of Disbursement
Mailing Address 3417 N. Seeley Ave., Uni	t 1F		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
•	State Zip Code IL 60618		Amount of Each Disbursement this Period
Purpose of Disbursement	12 00010		42.16
Travel Expense Candidate Name		Cotogony	
Candidate Name		Category/ Type	
Office Sought: House Disburse	ment For:  Primary General		
President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Chynna Clayton			Transaction ID: SB21B-2214 Date of Disbursement
			M M / D D / Y Y Y
Mailing Address 5041 Suitland Road			12 14 2010
•	State Zip Code MD 20746		Amount of Each Disbursement this Period
Purpose of Disbursement	20710		20.10
Travel Expense Candidate Name		Catagory	
Candidate Name		Category/ Type	
Office Sought: House Disburse	ment For:  Primary General		
President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Chynna Clayton			Transaction ID: SB21B-2215 Date of Disbursement
Mailing Address 5041 Suitland Road			12 14 2010
	State Zip Code MD 20746		Amount of Each Disbursement this Period
Purpose of Disbursement		• •	50.00
Airline Baggage Fees Candidate Name		Category/	
		Type	
Office Sought: House Disburse Senate	ment For:  Primary General		
President	Other (specify)		
State: District:			
SUBTOTAL of Disbursements This Page (optional) .			112.26

C.

SCHEDULE B (FEC Form 3X)			
,	Use separate schedule(s) for each category of the	FOR LINE (check only	
ITEMIZED DISBURSEMENTS	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) Chynna Clayton			Transaction ID: SB21B-2216 Date of Disbursement
Mailing Address 5041 Suitland Road			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 12 \end{smallmatrix} & \begin{smallmatrix} D & D & D \\ & 14 \end{smallmatrix} & \begin{smallmatrix} Y & Y & Y & Y \\ & 2010 \end{smallmatrix}$
•	State Zip Code		Amount of Each Disbursement this Period
Suitland Purpose of Disbursement	MD 20746		700.00
Travel & Subsistence Expense Reimb  Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	.,,,,,	
State: District:			
Full Name (Last, First, Middle Initial) NORA COHEN			Transaction ID: SB21B-2217 Date of Disbursement
Mailing Address 1650 Park Road, NW, A	ot B		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Washington	State Zip Code DC 20010		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			34.35
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) NORA COHEN			Transaction ID: SB21B-2218 Date of Disbursement
Mailing Address 1650 Park Road, NW, A	ot B		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
City Washington	State Zip Code DC 20010		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			396.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	- ·		
SURTOTAL of Dishursements This Page (optional)			1130.35

C.

age# 11990129043			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only of X 21b	
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam		y any person for	the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	TRAVEL OFFSET ACCOU	JNT	
Full Name (Last, First, Middle Initial) HANNAH EDWARDS			Transaction ID: SB21B-2219 Date of Disbursement
Mailing Address 432 10th Street, NE			$\begin{bmatrix} 1 & 2 & M & 1 & 4 & 1 & 4 & 1 & 1 & 1 & 1 & 1 & 1$
City Washington	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			36.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2220
HANNAH EDWARDS  Mailing Address 432 10th Street, NE			Date of Disbursement
City Washington	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement Train Travel			21.00
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2221
HANNAH EDWARDS			Date of Disbursement
Mailing Address 432 10th Street, NE			12 M / D 1 4 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			500.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		
State: District:	· · · · · · · · · · · · · · · · · · ·		
SUBTOTAL of Disbursements This Page (optional)		<b>•</b>	557.00

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ago;; 11000120011			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	
II EMIZED DISBURSEMENTS	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) Michael Epstein			Transaction ID: SB21B-2222 Date of Disbursement
Mailing Address 134 Oxford Drive			12
,	State Zip Code NJ 07670		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		· ·	70.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)	,,	
State: District:			
Full Name (Last, First, Middle Initial) Michael Epstein			Transaction ID: SB21B-2223 Date of Disbursement
Mailing Address 134 Oxford Drive			12 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code NJ 07670		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		•	700.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Kathryn Hinterlong			<b>Transaction ID:</b> SB21B-2224 Date of Disbursement
Mailing Address 3920 N. Sheridan Road,	<b>#</b> 508		12
	State Zip Code IL 60613		Amount of Each Disbursement this Period
Purpose of Disbursement Events-Site Supplies		, ,	32.89
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	- (-F)/ <b>A</b>		
SUBTOTAL of Disbursements This Page (optional) .		<b></b>	802.89

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

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)	e and address of any political	Committee to son	Cit contributions from such committee
DEMOCRATIC NATIONAL COMMITTEE	TRAVEL OFFSET ACCO	TNUC	
Full Name (Last, First, Middle Initial) Kathryn Hinterlong			Transaction ID: SB21B-2225 Date of Disbursement
Mailing Address 3920 N. Sheridan Road,	#508		$\begin{bmatrix} 1 & 2 & M & M & M & M & M & M & M & M & M$
City Chicago	State Zip Code IL 60613		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			44.81
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			Turney Mary ID CD04D 0000
Kristen Jarvis			Transaction ID: SB21B-2226 Date of Disbursement
Mailing Address 1100 6th Street, SW, Ap	t 315		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Washington	State Zip Code DC 20024		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			200.00
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Aimee Jasculca			Transaction ID: SB21B-2227 Date of Disbursement
Mailing Address 808 Columbus Ave., Apt	22A		12 M / D D D / Y 2010 Y
City New York	State Zip Code NY 10025		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		· ·	700.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	7.	
State: District:			
SUBTOTAL of Disbursements This Page (optional)			944.81

C.

age# 11990129046			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	v one)
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	DUNT	
Full Name (Last, First, Middle Initial) Kerstin Smith			Transaction ID: SB21B-2228 Date of Disbursement
Mailing Address 105 Fountainview Lane,	Unit 3B		12 M / D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Lombard	State Zip Code IL 60148		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			88.83
Candidate Name		Category/ Type	
Senate President	ement For:  Primary General  Other (specify)		
State: District:  Full Name (Last, First, Middle Initial)			T ID OD04D 0000
Kerstin Smith			Transaction ID: SB21B-2229 Date of Disbursement
Mailing Address 105 Fountainview Lane,	Unit 3B		$\begin{bmatrix} \begin{smallmatrix} M & Z & M \\ 1 & 2 & M \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & Y & Q \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Lombard	State Zip Code IL 60148		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees		• •	50.00
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Kerstin Smith			Transaction ID: SB21B-2230 Date of Disbursement
Mailing Address 105 Fountainview Lane,	Unit 3B		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
City Lombard	State Zip Code IL 60148		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			500.00
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District:			
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	638.83

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SCHEDULE B (FEC Form 3X)	Ose separate scriedule(s) (check			FOR LINE NUMBER: PAGE (check only one)								GE	192 / 260			
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 21b 27			22 28a		23 28b	F	24 28c		25 29	$\square$	26 80b		
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name														;		
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL	OFFSET ACC	OUN	N <sup>-</sup>	Γ											
Full Name (Last, First, Middle Initial) Brandon Lepow  Mailing Address 2401 Calvert St., NW, Ap	ot. 509						Date o		sburs				231 0 1 0	Y		
•	State DC	Zip Code 20008					Amou	nt o	f Each	n Di	sburse	men	t this F	Period		
Purpose of Disbursement Travel Expense Candidate Name					egory/		L.				•		69.97		_	
Office Sought:    House   Disburse     Senate   President     State: District:	ment For: Primary Other (spe	General <b>▼</b>		13	/pe											
Full Name (Last, First, Middle Initial) Brandon Lepow  Mailing Address 2401 Calvert St., NW, Ap	ot. 509						Date o		sburs		SB21E ent		0 1 (	) <sup>Y</sup>		
•	State DC	Zip Code 20008				+	Amou	nt o	f Each	n Di	sburse	men	t this F	Period	_	
Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name		20000			egory/ /pe							3	30.00		]	
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General ccify) ▼														
Full Name (Last, First, Middle Initial) Kerry McNellis							Date of	of D	sburs	em				V	_	
Mailing Address 6 Dover Court							1 <sup>M</sup> 2	М	<b>1</b>	1 <b>4</b>	]	ž	0 i c	)		
San Carlos	State CA	Zip Code 94070					Amou	nt o	f Each	n Di	sburse	-	t this F		_ 1	
Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name					egory/ ype								00.00		_	
Senate President	ment For: Primary Other (spe	General ecify) ▼														
State: District:  SUBTOTAL of Disbursements This Page (optional) .					. •			_		_	•	89	99.97		]	

C.

ago# 11000120010			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	
		27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	TNUC	
Full Name (Last, First, Middle Initial) Kerry McNellis			Transaction ID: SB21B-2234 Date of Disbursement
Mailing Address 6 Dover Court			12 M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	State Zip Code CA 94070		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			300.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) Kerry McNellis			Transaction ID: SB21B-2235 Date of Disbursement
Mailing Address 6 Dover Court			12 14 7 2010
	State Zip Code CA 94070		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			600.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) Kerry McNellis			Transaction ID: SB21B-2236 Date of Disbursement
Mailing Address 6 Dover Court			$\begin{bmatrix} 1 & 2 & M \\ 1 & 2 & M \end{bmatrix} / \begin{bmatrix} 1 & 1 & 0 \\ 1 & 1 & 4 \end{bmatrix} / \begin{bmatrix} 1 & 1 & 0 \\ 1 & 2 & 0 & 1 & 0 \end{bmatrix}$
	State Zip Code CA 94070		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			72.42
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	Carlor (opcorry)		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	972.42

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only		PAGE 194 / 260
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b		24
	Detailed Guillinary Fage	27		28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT		
Full Name (Last, First, Middle Initial) Kerry McNellis			Transaction ID: SE	-
Mailing Address 6 Dover Court			12 / D 1 4	<sup>'</sup> 2010 <sup>'</sup>
City	State Zip Code		Amount of Each Disb	nursement this Period
San Carlos	CA 94070		Amount of Lacif Disc	
Purpose of Disbursement Travel & Subsistence Expense Reimb		•		600.00
Candidate Name		Category/ Type		
Senate President	ment For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) Katherine Nowak			Transaction ID: SE Date of Disbursemen	
Mailing Address 10918 Rim Road			12 14	2010
,	State Zip Code		Amount of Each Disb	oursement this Period
Escondido Purpose of Disbursement	CA 92026			22.20
Events-Site Supplies				
Candidate Name		Category/ Type		
Senate President	ement For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) Katherine Nowak			Transaction ID: SE Date of Disbursemen	t
Mailing Address 10918 Rim Road			12 14	2010
City Escondido	State Zip Code CA 92026		Amount of Each Disb	oursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb				700.00
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	~1		
State: District:	- ·			
SUBTOTAL of Disbursements This Page (optional)				1322.20

C.

age# 11990129050			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	
	Detailed Guillinary Fage	27	28a 28b 28c 29 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	TRAVEL OFFSET ACCC	DUNT	
Full Name (Last, First, Middle Initial) Brendan Olsen			Transaction ID: SB21B-2240 Date of Disbursement
Mailing Address 20 Baltic Avenue			$\begin{bmatrix} 1 & 2 & 1 & 4 & 1 & 4 & 1 \end{bmatrix} / \begin{bmatrix} 1 & 1 & 1 & 1 & 1 & 1 \\ 1 & 2 & 1 & 1 & 1 & 1 & 1 \end{bmatrix}$
City North Easton	State Zip Code MA 02356		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name		Category/	400.00
Office Sought: House Disburs: Senate President State: District:	ement For: Primary General Other (specify)	Туре	
Full Name (Last, First, Middle Initial) Michael O'Mary  Mailing Address 65 W. 70th Street, Apt 2	E		Transaction ID: SB21B-2241 Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City New York	State Zip Code NY 10023		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name		Cotononii	600.00
	_	Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial) Catherine Pallenik			Transaction ID: SB21B-2242 Date of Disbursement
Mailing Address 10401 Grosvenor Place,	Apt 420		$\begin{bmatrix} \begin{smallmatrix} M & Z & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
City North Bethesda	State Zip Code MD 20852		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			74.00
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)		
State: District:			
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	1074.00

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	NUMBER: PAGE 196 / 260
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one)  22
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam		by any person for	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	e and address of any political	COMMITTILLE TO SOI	icit contributions from such committee
DEMOCRATIC NATIONAL COMMITTEE	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) Catherine Pallenik			Transaction ID: SB21B-2243 Date of Disbursement
Mailing Address 10401 Grosvenor Place,	Apt 420		1 2 M
City North Bethesda	State Zip Code MD 20852		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		0 0	600.00
Candidate Name		Category/ Type	
Office Sought:  Senate President  State:  Disburse	ement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2244
Catherine Pallenik			Date of Disbursement
Mailing Address 10401 Grosvenor Place,	Apt 420		12 14 2010
City North Bethesda	State Zip Code MD 20852		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			156.88
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
Catherine Pallenik			<b>Transaction ID:</b> SB21B-2245  Date of Disbursement
Mailing Address 10401 Grosvenor Place,	Apt 420		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 1 & 4 \\ & 1 & 4 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ & 2 & 0 & 1 & 0 \end{bmatrix}$
City North Bethesda	State Zip Code MD 20852		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		• •	35.50
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For:  Primary  Other (specify)	1 урс	
State: District:	- ·		
SUBTOTAL of Disbursements This Page (optional)			792.38

C.

Use separate scriedule(s)   (about		FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	22 23 24 25 26
Any Information copied from such Reports and Statem	ents may not be sold or used	d by any person fo	28a 28b 28c 29 30 or the purpose of soliciting contributions
or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) Catherine Pallenik			Transaction ID: SB21B-2246 Date of Disbursement
Mailing Address 10401 Grosvenor Place,	Apt 420		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
	State Zip Code MD 20852		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			28.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Catherine Pallenik			Transaction ID: SB21B-2247 Date of Disbursement
Mailing Address 10401 Grosvenor Place,	Apt 420		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
,	State Zip Code MD 20852		Amount of Each Disbursement this Period
Purpose of Disbursement			65.00
Travel Expense Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	71	
State: District:			
Full Name (Last, First, Middle Initial) Catherine Pallenik			<b>Transaction ID:</b> SB21B-2248 Date of Disbursement
Mailing Address 10401 Grosvenor Place,	Apt 420		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 12 \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 14 \end{smallmatrix} \end{bmatrix} \ \ \ \ \begin{bmatrix} Y & Y & Y & Y \\ 2010 \end{smallmatrix} \end{bmatrix} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$
	State Zip Code MD 20852		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			25.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify) ▼		
State: District:			
SURTOTAL of Dishursements This Page (ontional)			118.00

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Use separate schedule(s)   (check			IE NUMBER: PAGE 198	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 23 2	24 25 26 28c 29 30b
Any Information copied from such Reports and Statem		d by any person for	or the purpose of soliciting	ng contributions
or for commercial purposes, other than using the name	and address of any political	committee to sol	icit contributions from si	uch committee
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT		
Full Name (Last, First, Middle Initial) Catherine Pallenik			Transaction ID: SE Date of Disbursemen	-
Mailing Address 10401 Grosvenor Place,	Apt 420		12 14	2010
,	State Zip Code MD 20852		Amount of Each Disb	oursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb				600.00
Candidate Name		Category/ Type		
Senate President	ment For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) Catherine Pallenik			Transaction ID: SE Date of Disbursemen	t
Mailing Address 10401 Grosvenor Place,	Apt 420		12 / 14	2010
,	State Zip Code MD 20852		Amount of Each Disb	ursement this Period
Purpose of Disbursement				43.19
Events-Site Supplies Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼	. 100		
State: District:				
Full Name (Last, First, Middle Initial) Catherine Pallenik			Transaction ID: SE Date of Disbursemen	-
Mailing Address 10401 Grosvenor Place,	Apt 420		12 / 14	Y 2010 Y
	State Zip Code MD 20852		Amount of Each Disb	oursement this Period
Purpose of Disbursement Travel Expense				253.68
Candidate Name		Category/ Type		
Senate President	ment For: Primary General Other (specify) ▼			
State: District:				
SURTOTAL of Dishursements This Page (ontional)				896.87

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SCHEDULE B (FEC Form 3X)	11	FOR LINE	NUMBER: PAGE 199 / 260
ITEMIZED DISBURSEMENTS	SEMENTS   Use separate scriedule(s)   (check or		
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	and address of any pointed.		ion contribution from coor committee
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) Catherine Pallenik			Transaction ID: SB21B-2252
			Date of Disbursement    M
Mailing Address 10401 Grosvenor Place,	Apt 420		12 14 2010
•	State Zip Code MD 20852		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			396.00
Candidate Name		Category/	
		Туре	
Office Sought: House Disburse Senate	ment For: Primary General		
President	Other (specify) ▼		
State: District: Full Name (Last, First, Middle Initial)			Turn and In 10 00010 0050
Catherine Pallenik			Transaction ID: SB21B-2253 Date of Disbursement
Mailing Address 10401 Grosvenor Place,	Apt 420		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} & \begin{smallmatrix} D & D & D \\ & 1 & 4 \end{smallmatrix} & \begin{smallmatrix} Y & Y & Y & Y \\ & 2 & 0 & 1 & 0 \end{smallmatrix}$
City	State Zip Code		Amount of Each Disbursement this Period
	MD 20852		70.00
Purpose of Disbursement Travel Expense		•	70.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate	ment For:  Primary General		
President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Catherine Pallenik			Transaction ID: SB21B-2254 Date of Disbursement
Mailing Address 10401 Grosvenor Place,	Apt 420		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   / \   \begin{bmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} \   / \   \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
	State Zip Code MD 20852		Amount of Each Disbursement this Period
Purpose of Disbursement			330.00
Travel & Subsistence Expense Reimb  Candidate Name		Category/	
		Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼		
State: District:	oulei (specily) ♥		
SUBTOTAL of Disbursements This Page (optional) .			796.00

C.

10401 Glosveriol Flace, Apt 420	nittee
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such common NAME OF COMMITTEE (In Full)  DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT  Full Name (Last, First, Middle Initial) Catherine Pallenik  Mailing Address 10401 Grosvenor Place, Apt 420  Transaction ID: SB21B-22 Date of Disbursement  Mailing Address 10401 Grosvenor Place, Apt 420	nittee
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT  Full Name (Last, First, Middle Initial) Catherine Pallenik  Mailing Address 10401 Grosvenor Place, Apt 420  Transaction ID: SB21B-22: Date of Disbursement	55
Catherine Pallenik  Mailing Address 10401 Grosvenor Place, Apt 420  Tansaction D. Ob2 19 22.	55
10401 Glosveriol Flace, Apt 420	
	010
City State Zip Code Amount of Each Disbursement North Bethesda MD 20852	
Purpose of Disbursement Travel Expense	75.00
Candidate Name  Category/ Type	
Office Sought:  Senate  Primary  Office Sought:  Senate  Primary  Other (specify)  State:  Disbursement For:  Primary  Other (specify)  ▼	
Full Name (Last, First, Middle Initial) Catherine Pallenik  Transaction ID: SB21B-22: Date of Disbursement	 56
	010
City State Zip Code Amount of Each Disbursement North Bethesda MD 20852	this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb	00.00
Candidate Name  Category/ Type	
Office Sought:  House Senate President  Disbursement For: Primary Other (specify) ▼	
State: District:  Full Name (Last, First, Middle Initial)  Transaction ID: SR21R-22	
Catherine Pallenik Date of Disbursement	
Mailing Address 10401 Grosvenor Place, Apt 420	010
City State Zip Code Amount of Each Disbursement North Bethesda MD 20852	
Purpose of Disbursement Travel Expense	6.80
Candidate Name Category/ Type	
Office Sought:  House  Senate  Primary  President  Disbursement For:  Primary  General  Other (specify) ▼	
State: District:	

C.

SCHEDULE B (FEC Form 3X)		LEODUNE	NUMBER DAGE ON (OCC
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	
II EMIZED DISBURSEMENTS	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) Catherine Pallenik			Transaction ID: SB21B-2258 Date of Disbursement
Mailing Address 10401 Grosvenor Place,	Apt 420		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
•	State Zip Code MD 20852		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			25.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify) ▼		
State: District: Full Name (Last, First, Middle Initial)			
Catherine Pallenik			Transaction ID: SB21B-2259 Date of Disbursement
Mailing Address 10401 Grosvenor Place,	Apt 420		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
•	State Zip Code MD 20852		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			400.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	· 		
Full Name (Last, First, Middle Initial) Catherine Pallenik			Transaction ID: SB21B-2260 Date of Disbursement
Mailing Address 10401 Grosvenor Place,	Apt 420		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
	State Zip Code MD 20852		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			20.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
SURTOTAL of Dishursements This Page (ontional)			445.00

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ige# 11990129057			
SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only X 21b 27	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		y any person fo	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	<u> </u>		
Full Name (Last, First, Middle Initial) Catherine Pallenik  Mailing Address 10401 Grosvenor Place,	Apt 420		Transaction ID: SB21B-2261 Date of Disbursement  1 2 1 4 2 0 1 0
City	State Zip Code MD 20852	•	Amount of Each Disbursement this Period 600.00
Candidate Name  Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)	Category/ Type	
Full Name (Last, First, Middle Initial) Paul Schnaitter  Mailing Address 7192 Parkland Street, #1	02		Transaction ID: SB21B-2262 Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Broomfield Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name	State Zip Code CO 80021  Tement For: Primary General Other (specify)	Category/ Type	Amount of Each Disbursement this Period 700.00
Full Name (Last, First, Middle Initial) Susan Sher  Mailing Address 3303 Water Street, NW,	#7B		Transaction ID: SB21B-2263 Date of Disbursement
Washington Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name	State Zip Code DC 20007	Category/ Type	Amount of Each Disbursement this Period 200.00
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	1500.00

C.

SCHEDULE B (FEC Form 3X)			NUMBER:	PAGE 203 / 260
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	24 25 26
	Detailed Summary Page	27	28a 28b	28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCC	DUNT		
Full Name (Last, First, Middle Initial) Kathleen Gluntz Skarin			Transaction ID: S Date of Disbursement	
Mailing Address 64 Sullivan Street, #3			12  / D 1 4	2010
•	State Zip Code MA 02129		Amount of Each Dis	bursement this Period
Purpose of Disbursement Airline Baggage Fees				50.00
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	,		
State: District:				
Full Name (Last, First, Middle Initial) Kathleen Gluntz Skarin			Transaction ID: S Date of Disbursement	
Mailing Address 64 Sullivan Street, #3			12 / 14	2010
City Charlestown	State Zip Code MA 02129		Amount of Each Dis	bursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb				700.00
Candidate Name		Category/ Type		
Senate President	ment For: Primary General Other (specify)	,		
State: District: Full Name (Last, First, Middle Initial)				
Ali Sutton			Transaction ID: S Date of Disbursement	nt
Mailing Address 1422 11th Street, NW, A	ot 2		12 M / D D D 1 4	2010
	State Zip Code DC 20001		Amount of Each Dis	bursement this Period
Purpose of Disbursement Travel Expense		• •		125.00
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	Туре		
State: District:	<b>□</b> (opcony) <b>▼</b>			
SUBTOTAL of Disbursements This Page (optional)				875.00

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SCHEDULE B (FEC Form 3X)	Han amounts and the Co	FOR LINE I	NUMBER:	PAGE 204 / 260
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	y one)	
	Detailed Summary Page	X 21b 27	22 23 28a 28b	24 25 26 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	UNT		
Full Name (Last, First, Middle Initial) Ali Sutton			Transaction ID: S Date of Disbursement	nt
Mailing Address 1422 11th Street, NW, A	ot 2		12 14	Y 2010 Y
,	State Zip Code DC 20001		Amount of Each Dis	bursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb				700.00
Candidate Name	'	Category/ Type		
Senate President	ment For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) Susan Watson			Transaction ID: S Date of Disbursement	nt
Mailing Address 16362 North Hawthorne	Lane		12 14	2010
•	State Zip Code IL 62864		Amount of Each Dis	bursement this Period
Purpose of Disbursement Travel Expense		•		40.12
Candidate Name		Category/ Type		
Senate President	ment For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) Susan Watson			Transaction ID: S Date of Disbursement	nt
Mailing Address 16362 North Hawthorne	Lane		12	2010
City Mount Vernon	State Zip Code IL 62864		Amount of Each Dis	bursement this Period
Purpose of Disbursement Airline Baggage Fees				25.00
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	. , , , ,		
State: District:				
SUBTOTAL of Disbursements This Page (optional)				765.12

C.

AGE# 11990129000		
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)    X   21b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam		any person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACCOU	NT
Full Name (Last, First, Middle Initial) Susan Watson		Transaction ID: SB21B-2270 Date of Disbursement
Mailing Address 16362 North Hawthorne	Lane	12 14 7 2010
City Mount Vernon	State Zip Code IL 62864	Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name	I	700.00 ategory/ Type
Office Sought: House Disburse Senate President State: District:	ement For:  Primary  General  Other (specify)	
Full Name (Last, First, Middle Initial) David Wilcox		Transaction ID: SB21B-2271 Date of Disbursement
Mailing Address 2062 Tecumseh Road		12 14 7 2010
City Manhattan	State Zip Code KS 66502	Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense Candidate Name	C	ategory/
Office Sought:  Senate President  State:  Disburse	ement For: Primary General Other (specify)	Туре
Full Name (Last, First, Middle Initial) David Wilcox		Transaction ID: SB21B-2272 Date of Disbursement
Mailing Address 2062 Tecumseh Road		12 M / D 1 4 Y 2 0 1 0 Y
City Manhattan	State Zip Code KS 66502	Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		700.00
Candidate Name		ategory/ Type
Office Sought: House Disburse Senate President	ement For:  Primary  Other (specify)	
State: District:		
SUBTOTAL of Disbursements This Page (optional)		1485.05

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

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)			NE NUMBER: PAGE 206 / 260 only one)									
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X	-		1e) 22 28a	_	23 28b	24 28	<sub>s</sub> F	25 29	26 30b		
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name			/ persor	for t	he pu	rpos	e of so	oliciting	contr	ibution			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACC	OUNT											
Full Name (Last, First, Middle Initial) Jessica Basset					Date o		sburse				Y		
Mailing Address 406 Orwood Place					1 <sup>M</sup> 2		1	5		ž 0 1 (	0		
City Syracuse	State Zip Code NY 13208				Amou	nt of	Each	Disbur	seme	-			
Purpose of Disbursement Travel Expense						-				86.50	)		
Candidate Name		Cate Ty											
Senate President	ement For: Primary General Other (specify)												
State: District: Full Name (Last, First, Middle Initial)				-	Trans	actio	on ID:	SB2	1B-2	274			
Jessica Basset				- 1	Date o		sburse	ement			Y		
Mailing Address 406 Orwood Place					1 2		1	5 /		ž 0 1 (	O `		
City Syracuse	State Zip Code NY 13208				Amou	nt of	Each	Disbur	seme	nt this	Period		
Purpose of Disbursement Airline Baggage Fees										50.00	)		
Candidate Name		Cate Ty											
Senate President	ement For: Primary General Other (specify)												
State: District:  Full Name (Last, First, Middle Initial)  Jessica Basset					<b>Frans</b> Date o			SB2	1B-2	275			
Mailing Address 406 Orwood Place					1 <sup>M</sup> 2	M /	<sup>D</sup> 1	5 /	Υ	ž 0 1 (	O Y		
City Syracuse	State Zip Code NY 13208				Amou	nt of	Each	Disbur	seme	nt this	Period		
Purpose of Disbursement Travel & Subsistence Expense Reimb	2 100									900.00	)		
Candidate Name		Cate Ty											
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)	· y	<del></del>										
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SUBTOTAL of Disbursements This Page (optional)			•						10	36.50			

	CHEDULE B (FEC Form 3X)	Use sen	arate schedule(s)		_		NUMBER: PAGE 207 / 26			260					
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	DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL	OFFSET ACC	OU	NT										
	Full Name (Last, First, Middle Initial) Brooke Joseph									sburs	eme		3-22	276	
	Mailing Address 1589 Brandywine Road						1	2	И /	D	15		Ž	0 1 0	) <sup>Y</sup>
	City San Mateo	State CA	Zip Code 94402				Ar	nour	nt of	Eacl	n Dis	sburse		t this F	
	Purpose of Disbursement Travel & Subsistence Expense Reimb							-	-				. 6	00.00	
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	Office Sought: House Disburs Senate President	ement For: Primary Other (spe	General ecify) ▼												
	State: District:														
	Full Name (Last, First, Middle Initial) LISA J KOHNKE						Da	te o	f Di	sburs	eme				
	Mailing Address 1210 Massachusetts Av Apt 1211	e., NW						2	/ /	D	15		ž	0 i c	) <sup>Y</sup>
	City Washington	State DC	Zip Code 20005				Ar	nour	nt of	Eacl	n Dis	sburse		t this F	
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	Mailing Address 1210 Massachusetts Av Apt 1211	e., NW					1	2	vi /	D	15		Ž	οťα	)
	City Washington	State DC	Zip Code 20005				Ar	nour	nt of	Eacl	n Dis	sburse	-	t this F	-
	Purpose of Disbursement Airline Baggage Fees						L	-	-	-			-	87.00	
	Candidate Name			С	atego Type	-									
	Senate President	ement For: Primary Other (spe	General ecify) ▼												
_	State: District:														
C.	JBTOTAL of Disbursements This Page (optional)					•							79	96.90	

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 208 / 260
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 23 2	24 25 26 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		d by any person for	or the purpose of soliciti	ng contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT		
Cull Name (Look Circh Middle Initial)				
Full Name (Last, First, Middle Initial) LISA J KOHNKE			Transaction ID: SE	-
Mailing Address 1210 Massachusetts Ave Apt 1211	., NW		12 M / D 1 5	2010
City Washington	State Zip Code DC 20005		Amount of Each Disk	oursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb				600.00
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)			
State: District:	-			
Full Name (Last, First, Middle Initial) DURWIN LAIRY			Transaction ID: SI Date of Disbursemen	ıt
Mailing Address 1006 EAST 11TH STREE	ΞΤ		12 15	ŽOŽOŠ
City NORTH LITTLE ROCK	State Zip Code AR 72114		Amount of Each Disk	oursement this Period
Purpose of Disbursement Travel Expense				50.00
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)			
State: District:	-			
Full Name (Last, First, Middle Initial) DURWIN LAIRY			Transaction ID: SI Date of Disbursemen	t
Mailing Address 1006 EAST 11TH STREE	ΞΤ		12 15	2010
City NORTH LITTLE ROCK	State Zip Code AR 72114		Amount of Each Disk	oursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb				800.00
Candidate Name		Category/ Type		
Senate President	ment For: Primary General Other (specify)			
State: District:				
SURTOTAL of Dishursements This Page (ontional)				1450.00

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	
		27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	DUNT	
Full Name (Last, First, Middle Initial) Allison O'Brien			Transaction ID: SB21B-2282 Date of Disbursement
Mailing Address 3120 R Street, NW, Apt 1	07		12 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	State Zip Code DC 20007		Amount of Each Disbursement this Period
Purpose of Disbursement Events-Site Supplies		· ·	16.04
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼		
State: District: Full Name (Last, First, Middle Initial)			
Allison O'Brien			Transaction ID: SB21B-2283 Date of Disbursement
Mailing Address 3120 R Street, NW, Apt 1	07		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 5 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
	State Zip Code DC 20007		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		· · ·	142.93
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) Allison O'Brien			Transaction ID: SB21B-2284 Date of Disbursement
Mailing Address 3120 R Street, NW, Apt 1	07		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 5 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
	State Zip Code DC 20007		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			52.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
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SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	210.97

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FEMIZED DISBURSEMENTS    for each category of the Detailed Summary Page   X   21b   22   23   24   25   26   26   26   26   27   28   28   28   29   29   29   20   20   20   20   20	CHEDULE B (FEC Form 3X)	lise sena	arate schedule(s)		-	LINE NUMBER: PAGE 210 / 26			0 / 26	30			
y Information copied from such Reports and Statements may not be said or used by any person for the purpose of soliciting contributions for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committees.  NAME OF COMMITTEE (in Full)  DEMOCRATIO NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT  Full Name (Last, First, Middle Initial)  Allison O'Brien  Mailing Address 3120 R Street, NW, Apt 107  City  State Zip Code  Washington  DC 20007  Purpose of Disbursement  Transaction ID: SB218-2285  Date of Disbursement this Period  Washing Address 1045 W. County Line Road  City  Purpose of Disbursement  Transaction ID: SB218-2286  Date of Disbursement  Transaction ID: SB218-2287  Date of Disbursement Inspection  Transaction ID: SB218-2287  Date of Disbursement  Transaction ID: SB218-2287  Date of Disbursement  Transaction ID: SB218-2287  Date of Disbursement Inspection  Transaction ID: SB218-2286  Date of Disburs	EMIZED DISBURSEMENTS	for each o	category of the	l —		nly c	<u> </u>		7 26				
for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee  NAME OF COMMITTEE (in Ful)  DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT  Full Name (Last, First, Middle Initial)  Allison O'Brien  Mailing Address 3120 R Street, NW, Apt 107  City State Zip Code Disbursement  Travel & Subsistence Expense Reimb  Cardidate Name  Office Sought: House Senate Priside Initial)  JESSE J ROSEN  Mailing Address 1045 W. County Line Road  City State Zip Code Wil 53217  Purpose of Disbursement  Travel Expenses  Candidate Name  Office Sought: House Senate Prisident Wil 53217  Purpose of Disbursement  Travel Expenses  Candidate Name  Office Sought: House Senate Prisident Wil 53217  Purpose of Disbursement Travel Expenses  Candidate Name  Office Sought: House Senate Prisident Wil 53217  Purpose of Disbursement Travel Expenses  Candidate Name  Office Sought: House Senate Prisident Wil 53217  Purpose of Disbursement Travel Expenses  Candidate Name  Office Sought: House Senate Prisident Wil 53217  Purpose of Disbursement Travel Expenses  Candidate Name  Office Sought: House Senate Prisident State: District:  District:  District: Transaction ID: SB21B-2286  Date of Disbursement Inis Period  Transaction ID: SB21B-2287  Date of Disbursement Inis Period  Transaction ID: SB21B-2286  Date of Disbursement Inis Period Initial Initial Initial Initial I		Detailed	Summary Page	∐Ĥ	1		_	<b>⊣</b>	Н		$\vdash$	$\vdash$	30b
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT  Full Name (Last, First, Middle Initial) Allison O'Brien  Mailing Address 3120 R Street, NW, Apt 107  City State Zip Code Washington DC 20007  Purpose of Disbursement Travel & Subsistence Expense Reimb  Cardidate Name  Office Sought:   House   Disbursement For: Senate   Primary   General   President   District:  Full Name (Last, First, Middle Initial) JESSE J ROSEN  Amount of Each Disbursement inits Period  Amount of Each Disbursement   12													•
Full Name (Last, First, Middle Initial) Allison O'Brien  Malling Address 3120 R Street, NW, Apt 107  City State Zip Code Washington DC 20007  Purpose of Disbursement Travel Subsistence Expense Reimb  Candidate Name  Office Sought: Senate Priesident Disbursement Travel Expense  Candidate Name  Office Sought: House Senate Priesident Disbursement Travel Repense Reimb  Candidate Name  City State Zip Code Wil 53217  Purpose of Disbursement Travel Repense Reimb  Candidate Name  Category' Type  Transaction ID: SB21B-2286  Date of Disbursement this Period  Amount of Each Disbursement Travel Repense Reimb  Category' Type  Amount of Each Disbursement Travel Repense Reimb  Category' Type  Transaction ID: SB21B-2286  Date of Disbursement Travel Repense Reimb  Category' Type  Transaction ID: SB21B-2286  Date of Disbursement Travel Repense Reimb  Category' Type  Transaction ID: SB21B-2287  Date of Disbursement Travel Repense Reimb  Category' Type  Transaction ID: SB21B-2287  Date of Disbursement Travel Repense Reimb  Category' Type  Transaction ID: SB21B-2287  Date of Disbursement Travel Repense Reimb  Category' Type  Transaction ID: SB21B-2287  Date of Disbursement Travel Repense Reimb  Category' Type  Transaction ID: SB21B-2287  Date of Disbursement Travel Repense Reimb  Category' Type  Transaction ID: SB21B-2287  Date of Disbursement Travel Repense Reimb  Category' Type  Transaction ID: SB21B-2287  Date of Disbursement Travel Repense Reimb  Category' Type  Transaction ID: SB21B-2287  Date of Disbursement Travel Repense Reimb  Category' Type  Transaction ID: SB21B-2287  Date of Disbursement Travel Repense Reimb  Category' Type  Transaction ID: SB21B-2287  Date of Disbursement Travel Repense Reimb  Category' Type  Transaction ID: SB21B-2287  Date of Disbursement Travel Repense Reimb  Category' Type  Transaction ID: SB21B-2287  Date of Disbursement Travel Repense Reimb  Category' Type  Transaction ID: SB21B-2287  Date of Disbursement Travel Repense Reimb  Category' Type  Transaction ID: SB21B-2287  Date of Disbursement Trav	<u> </u>	e and addres	ss of any political	commi	tee to s	solic	it contrib	utions f	rom s	such c	ommitte	e 	
Full Name (Last, First, Middle Initial)  Allison O'Brien  Mailing Address 3120 R Street, NW, Apt 107  City State: District:  Full Name (Last, First, Middle Initial)  State: District:  Full Name (Last, First, Middle Initial)  State: District:  Full Name (Last, First, Middle Initial)  JESSE J ROSEN  Mailing Address 1045 W. County Line Road  City Senate President Other (specify) ▼  Purpose of Disbursement Travel & Senate Primary General Portured Each Disbursement this Period  Category' Type  Amount of Each Disbursement this Period  Transaction ID: SB21B-2286  Date of Disbursement  Mailing Address 1045 W. County Line Road  City State Zip Code WI 53217  Purpose of Disbursement Travel Expense  Candidate Name  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  District:  Full Name (Last, First, Middle Initial)  JESSE J ROSEN  Mailing Address 1045 W. County Line Road  City Senate President Other (specify) ▼  District:  Full Name (Last, First, Middle Initial)  JESSE J ROSEN  Mailing Address 1045 W. County Line Road  City Senate President Other (specify) ▼  District:  Full Name (Last, First, Middle Initial)  JESSE J ROSEN  Mailing Address 1045 W. County Line Road  City Senate President Other (specify) ▼  District:  Transaction ID: SB21B-2287  Date of Disbursement Init Period  Amount of Each Disbursement Init Period  Category' Type  Anount of Each Disbursement Init Period  Category' Type  Category' Type  Anount of Each Disbursement	, ,	TDAVEL (	OEESET ACC	OLINIT									
Allison O'Brien  Mailing Address 3120 R Street, NW, Apt 107  City State Disbursement  Candidate Name  City State Disbursement  Travel & Subsistence Expense Reimb  Candidate Name  O'ffice Sought: House Primary General Other (specify) ▼  State Disbursement  Travel & Subsistence Expense Reimb  Candidate Name  O'ffice Sought: House Primary General Other (specify) ▼  State Disbursement  Travel Expense  Category/ Type  Transaction ID: SB21B-2286 Date of Disbursement Ibis Period  Amount of Each Disbursement Ibis Period  Transaction ID: SB21B-2286 Date of Disbursement  Travel Expense  Category/ Type  Transaction ID: SB21B-2286 Date of Disbursement  Travel Expense  Category/ Type  Transaction ID: SB21B-2286 Date of Disbursement  Travel Expense  Category/ Type  Transaction ID: SB21B-2286 Date of Disbursement Ibis Period  Amount of Each Disbursement Ibis Period  Travel Expense  Category/ Type  Transaction ID: SB21B-2286 Date of Disbursement Ibis Period  Travel Expense  Category/ Type  Transaction ID: SB21B-2286 Date of Disbursement Ibis Period  Travel Expense  Category/ Type  Transaction ID: SB21B-2286 Date of Disbursement Ibis Period  Travel Expense  Category/ Type  Transaction ID: SB21B-2287 Date of Disbursement  Travel Expense  Category/ Type  Transaction ID: SB21B-2287 Date of Disbursement  Travel Expense  Category/ Type  Transaction ID: SB21B-2287 Date of Disbursement  Travel Expense  Category/ Type  Transaction ID: SB21B-2287 Date of Disbursement  Travel Expense  Category/ Type  Transaction ID: SB21B-2286 Date of Disbursement  Travel Expense  Category/ Type  Transaction ID: SB21B-2286 Date of Disbursement  Travel Expense  Category/ Type	DEMOCRATIC NATIONAL COMMITTEE	TINAVEL	OITSLI ACO	CONT									
State   Zip Code   Disbursement   Senate   Primary   General   Category   Type									_		3-2285		
Washington  Purpose of Disbursement Travel & Subsistence Expense Reimb  Cardidate Name  Office Sought:	Mailing Address 3120 R Street, NW, Apt	107					1 2 M	/ D	1 5	/ Y	ž 0 1	0 Y	
Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name  Office Sought:	City	State	Zip Code				Amount	of Eacl	h Dis	burser	ment this	Peri	od
Travel & Subsistence Expense Reimb Candidate Name  Office Sought:		DC	20007					•			000.4	20	
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Office Sought:	Candidate Name				•								
Description   Disbursement   Disb	Senate President	Primary											
Mailing Address 1045 W. County Line Road  City State Zip Code WI 53217  Purpose of Disbursement Travel Expense  Candidate Name  Office Sought: House President Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) JESSE J ROSEN  Mailing Address 1045 W. County Line Road  City State Zip Code Bayside WI 53217  Purpose of Disbursement  Category/ Type  Transaction ID: SB21B-2287 Date of Disbursement  12  15  2010  Amount of Each Disbursement this Period  Transaction ID: SB21B-2287 Date of Disbursement  12  15  2010  Amount of Each Disbursement this Period  Category/ Type  Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  Senate President Other (specify) ▼  State: District:  Disbursement For: Senate Primary General Other (specify) ▼  State: District:  Disbursements This Page (optional)	,								_		3-2286		
Bayside WI 53217  Purpose of Disbursement Travel Expense Candidate Name  Office Sought: House President State: District:  Full Name (Last, First, Middle Initial) JESSE J ROSEN  Mailing Address 1045 W. County Line Road  City State: Zip Code WI 53217  Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name  Office Sought: House Primary General Office Sought: House Primary General Office Sought: House Disbursement For: Senate Primary General Office Sought: House Disbursement	Mailing Address 1045 W. County Line Ro	ad					12 M	/ D	15	/ Y	ž 0 1	0	
Purpose of Disbursement Travel Expense Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) JESSE J ROSEN  Mailing Address 1045 W. County Line Road  City State Zip Code Bayside WI 53217  Purpose of Disbursement Travel & Subsistence Expense Reimb  Candidate Name  Office Sought: House Senate Primary General  Office Sought: Other (specify) ▼  Disbursement For: Senate Primary General  Other (specify) ▼  Amount of Each Disbursement this Period  600.00  Amount of Each Disbursement this Period  Furpose of Disbursement For: Senate Primary General  Other (specify) ▼  State: District:  District:  District: Disbursements This Page (optional)							Amount	of Eac	h Dis	burser	ment this	Peri	od
Travel Expense  Candidate Name  Disbursement For: Senate Primary Other (specify)  State: District:  Full Name (Last, First, Middle Initial) JESSE J ROSEN  Mailing Address 1045 W. County Line Road  City Bayside Wil 53217  Purpose of Disbursement Travel & Subsistence Expense Reimb  Candidate Name  Office Sought: House Senate Primary General  Other (specify)  Amount of Each Disbursement this Period  Category/ Type  Office Sought: President State: District:  District: District:  Dis	. <u> </u>	WI	53217			_		•			263	13	
Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) JESSE J ROSEN  Mailing Address 1045 W. County Line Road  City State Zip Code WI 53217  Purpose of Disbursement Travel & Subsistence Expense Reimb  Candidate Name  Office Sought: House Primary General Other (specify) ▼  Office Sought: House Primary General Other (specify) ▼  District:  District:  JBTOTAL of Disbursements This Page (optional)    DTAL This Period (last page this line number only)    Transaction ID: SB21B-2287  Date of Disbursement  Transaction ID: Sall Select  Transaction ID: Sall Select  Transaction ID: Sall Select  Transaction ID: Sall											200.	١٥	
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Full Name (Last, First, Middle Initial)  JESSE J ROSEN  Mailing Address 1045 W. County Line Road  City State Zip Code Bayside WI 53217  Purpose of Disbursement  Travel & Subsistence Expense Reimb  Candidate Name  Office Sought: House Primary General President President State: District:  Disbursements This Page (optional)	Senate President	Primary											
JESSE J ROSEN  Mailing Address 1045 W. County Line Road  City State Zip Code WI 53217  Purpose of Disbursement Travel & Subsistence Expense Reimb  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  JBTOTAL of Disbursements This Page (optional)						+	_			ND045			
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Bayside WI 53217  Purpose of Disbursement Travel & Subsistence Expense Reimb  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  District:  District:  District: Primary General Other (specify) ▼  Disbursement For: Senate Primary General Other (specify) ▼	Mailing Address 1045 W. County Line Ro	ad					12		1 5	L	201	0	
Purpose of Disbursement Travel & Subsistence Expense Reimb  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  President Other (specify)   State: District:  DISBURSEMENT FOR:  Senate Primary General Other (specify)   OTAL This Period (last page this line number only)							Amount	of Eac	h Dis	burser	ment this	Peri	od
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UBTOTAL of Disbursements This Page (optional)	Senate President	Primary		,,,									
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AN026 FEC Schedule B ( Form 3X) (Revised 02	OTAL This Period (last page this line number only)	)			•								
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE (check only	
II EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) Ethan Rosenzweig			Transaction ID: SB21B-2288 Date of Disbursement
Mailing Address 1301 Clifton Road NE			12 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code GA 30322		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		· ·	500.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial) Ethan Rosenzweig			Transaction ID: SB21B-2289 Date of Disbursement
Mailing Address 1301 Clifton Road NE			1 2 M / D 1 5 / Y 2 0 1 0 Y
,	State Zip Code GA 30322		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			700.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Ethan Rosenzweig			Transaction ID: SB21B-2290 Date of Disbursement
Mailing Address 1301 Clifton Road NE			$\begin{bmatrix} M & M \\ 1 & 2 \end{bmatrix} & \begin{bmatrix} D & D \\ 1 & D \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	State Zip Code GA 30322		Amount of Each Disbursement this Period
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Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	· · · · · · · · · · · · · · · · · · ·		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	1536.00

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SCHEDULE B (FEC Form 3X)		FORTING	ALLIMDED.	DAOE 0/2/222
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check onl	: NUMBER: y one)	PAGE 212/260
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Any Information copied from such Reports and Statem	ents may not be sold or used	d by any person t		28c 29 30b
or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT		
Full Name (Last, First, Middle Initial)			Transaction ID: SI	B21B-2291
Ethan Rosenzweig			Date of Disbursemer	
Mailing Address 1301 Clifton Road NE			12 15	Y Y O Y O Y
City Atlanta	State Zip Code GA 30322		Amount of Each Disk	oursement this Period
Purpose of Disbursement	art 66622			330.00
Travel & Subsistence Expense Reimb				
Candidate Name		Category/ Type		
Office Sought: House Disburse	ment For:			
Senate   President	Primary General Other (specify) ▼			
State: District:	Caron (openity)			
Full Name (Last, First, Middle Initial)			Transaction ID: SI	-
Ethan Rosenzweig			Date of Disbursemer	
Mailing Address 1301 Clifton Road NE			12 15	2010
•	State Zip Code		Amount of Each Disk	oursement this Period
Atlanta	GA 30322			336.00
Purpose of Disbursement Travel & Subsistence Expense Reimb				
Candidate Name		Category/ Type		
Office Sought: House Disburse	ment For:    Primary   General			
President	Other (specify)			
State: District:	•			
Full Name (Last, First, Middle Initial) PETER A SELFRIDGE			Transaction ID: SI Date of Disbursemer	
			M M / D D D 1 2 1 5	2010
Mailing Address 1414 Belmont St., NW, A	pt 301		12 15	2010
City Washington	State Zip Code DC 20009		Amount of Each Disk	oursement this Period
Purpose of Disbursement	20000	-		25.00
Travel Expense				
Candidate Name		Category/ Type		
	ment For:			
Senate President	Primary General Other (specify) ▼			
State: District:	Said (opodily)			
SURTOTAL of Dichurcoments This Boss (astissed)				691.00
<b>SUBTOTAL</b> of Disbursements This Page (optional)		············		32 175 6

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	NUMBER: PAGE 213 / 260 / one) 22
		27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) PETER A SELFRIDGE			Transaction ID: SB21B-2294 Date of Disbursement
Mailing Address 1414 Belmont St., NW, A	pt 301		1 2 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code DC 20009		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		•	132.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			
Roy Sherman			Transaction ID: SB21B-2295 Date of Disbursement
Mailing Address 1020 SE 5th Avenue			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 5 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
,	State Zip Code FL 33060		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			44.48
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Roy Sherman			Transaction ID: SB21B-2296 Date of Disbursement
Mailing Address 1020 SE 5th Avenue			1 2 M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	State Zip Code FL 33060		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			600.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	. ,,,,	
State: District:	Caron (openiny)		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	776.48

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

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SCHEDULE B (FEC Form 3X)		FORUNE	NUMBER. DAGE 044/000
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	
II LIMILLO DIODONOLIVILIVIO	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		d by any person for	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial)		T	Turner attention ID OPO1D 0007
Roy Sherman			Transaction ID: SB21B-2297 Date of Disbursement
Mailing Address 1020 SE 5th Avenue			12 M 7 D 1 5 Y 2 0 1 0 Y
City Pompano Beach	State Zip Code FL 33060		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			143.50
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Roy Sherman			Transaction ID: SB21B-2298 Date of Disbursement
Mailing Address 1020 SE 5th Avenue			12 M / D D / Y Y Y Y Y Y
City Pompano Beach	State Zip Code FL 33060		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			426.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) LISA SOHN			Transaction ID: SB21B-2299 Date of Disbursement
Mailing Address 3400 Sacramento Street	Apt 6		12 M 15 V 2010 Y
City San Francisco	State Zip Code CA 94118		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			100.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	• • • • • •		
SURTOTAL of Dishursements This Page (ontional)			669.50

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

FOR LINE NUMBER: PAGE 215 / 260 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b 22 23 24 26 Detailed Summary Page 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-2300 Benjamin Solomon Date of Disbursement 15 2010 Mailing Address 14 Black Birch Road City State Zip Code Amount of Each Disbursement this Period Scotch Plains NJ 07076 119.21 Purpose of Disbursement Travel Expense Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-2301 Benjamin Solomon Date of Disbursement 15 2010 Mailing Address 14 Black Birch Road City State Zip Code Amount of Each Disbursement this Period Scotch Plains 07076 NJ 500.00 Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-2302 JEFFREY TATE Date of Disbursement 2010 Mailing Address 1216 7th St., NW, Apt 101 City State Zip Code Amount of Each Disbursement this Period Washington DC 20001 600.00 Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: 1219.21

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

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SCHEDULE B (FEC Form 3X)		Use separate schedule(s)			OR LIN			R:			PA	PAGE		260	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page  for each category of the Detailed Summary Page    X   21b   27						22 28a		23 28b		24 28c		25 29	$\mathbf{\square}$	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name														5	
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL	OFFSET ACC	OUN	٧	Γ										
Full Name (Last, First, Middle Initial) Candace Wint  Mailing Address 3808 Milan Drive, Apt B							Date o		sburs				803 0 1 0	) <sup>Y</sup>	
	State VA	Zip Code 22305					Amou	nt o	f Each	ı D	isburse	men	t this F	Period	d
Purpose of Disbursement Events-Site Supplies Candidate Name					egory/		L.						55.77		
Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General cify) ▼													
Full Name (Last, First, Middle Initial) Candace Wint  Mailing Address 3808 Milan Drive, Apt B							Date o		sburs				0 1 C	) <sup>Y</sup>	
City	State VA	Zip Code 22305					Amou	nt o	f Each	ı D	isburse	men	t this F	Period	
Purpose of Disbursement Travel Expense Candidate Name	VA	22305	Ca	ate	egory/				•			1	58.69		
	ement For: Primary Other (spe	General ecify) ▼			pe /pe										
Full Name (Last, First, Middle Initial) Candace Wint							Date o		sburs	em				V	
Mailing Address 3808 Milan Drive, Apt B							1 2	IVI		1 5		2	0 i c	)	
	State VA	Zip Code 22305					Amou	nt o	f Each	n D	isburse	men	t this F		b
Airline Baggage Fees Candidate Name					egory/ /pe				•	•	•			•	_
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General ecify)													
SUBTOTAL of Disbursements This Page (optional) .					. •			•				2	16.46		

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ago# 11000120012			
SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	NUMBER: PAGE 217 / 260
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) Candace Wint			Transaction ID: SB21B-2306 Date of Disbursement
Mailing Address 3808 Milan Drive, Apt B			12 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code VA 22305		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		, ,	800.00
Candidate Name		Category/ Type	
Office Sought:    House   Disburse     Senate   President     State: District:	ment For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2509
AMERICAN EXPRESS			Date of Disbursement
Mailing Address P O BOX 1270			12 7 2010
,	State Zip Code NJ 07101		Amount of Each Disbursement this Period
Purpose of Disbursement Prepaid Expenses		•	10254.91
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify) ▼		See Attached Memo Entry
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2509-10000
AVIS RENT-A-CAR			Date of Disbursement
Mailing Address 2000 Arch Street			1 2 M / D 1 5 / Y 2 0 1 0 Y
	State Zip Code PA 19103		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental		0 0	75.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		[MEMO ITEM] Memo Entry
State: District:	Curer (specify)		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	11054.91

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

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age# 11990129073		
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	for each category of the	FOR LINE NUMBER: (check only one)  X 21b 22 23 24 25 26 26 27 28a 28b 28c 29 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam		ny person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	TRAVEL OFFSET ACCOUN	IT
Full Name (Last, First, Middle Initial) Avis Rent-A-Car		Transaction ID: SB21B-2509-20000 Date of Disbursement
Mailing Address 19601 Maplewood Avenu	ue	12 M / D D / Y 2010 Y
City Cleveland	State Zip Code OH 44135	Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental		2045.58
Candidate Name		tegory/ Type
Senate President	ement For: Primary General Other (specify)	[MEMO ITEM] Memo Entry
State: District: Full Name (Last, First, Middle Initial)		Transaction ID: SB21B-2509-30000
AVIS-RENT-A-CAR  Mailing Address 213 E RICH STREET		Date of Disbursement  1 2 1 5 7 2 0 1 0
City COLUMBUS	State Zip Code OH 43215	Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental		1327.00
Candidate Name		tegory/ ype
Senate President	ement For: Primary General Other (specify)	[MEMO ITEM] Memo Entry
State: District: Full Name (Last, First, Middle Initial)		Transaction ID: SB21B-2509-40000
Avis Rent-A-Car		Date of Disbursement
Mailing Address 202 Porter Street		12 M / D 1 5 / Y 2 0 1 0 Y
City East Boston	State Zip Code MA 02128	Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental		672.50
Candidate Name		tegory/ ype
Office Sought: House Disburse Senate President	ement For:  Primary  General  Other (specify)	[MEMO ITEM] Memo Entry
State: District:	<b>■</b>	
SUBTOTAL of Disbursements This Page (optional)		• 0.00

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

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)			NE NUMBER: PAGE 219 / 260
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	۱,	21b 27	only one)  22
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name	n for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUN	Т	
Full Name (Last, First, Middle Initial) Avis Rent-A-Car  Mailing Address Miami Intl Airport				Transaction ID: SB21B-2509-50000 Date of Disbursement  12  15  2010
2330 NW 37th Avenue	Otata Zin Oada			
•	State Zip Code FL 33142			Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental				75.00
Candidate Name			egory/ ype	
Office Sought:    House   Disburse     Senate   President     State: District:	ement For: Primary General Other (specify)		уре	[MEMO ITEM] Memo Entry
Full Name (Last, First, Middle Initial)				Transaction ID: SB21B-2509-60000
Avis Rent-A-Car				Date of Disbursement
Mailing Address Tweed-New Haven Airpoi	rt			M M M / D 1 5 / Y 2 0 1 0 Y
	State Zip Code CT 06510			Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental				1026.70
Candidate Name		ı	tegory/	
Office Sought:    House   Disburse     Senate   President     State: District:	ment For: Primary General Other (specify)			Memo Entry
Full Name (Last, First, Middle Initial)				Transaction ID: SB21B-2509-70000
Avis-Rent-A-Car				Date of Disbursement
Mailing Address Philadelphia Intl Airport 1 Arrivals Road				12 M / D 1 5 / Y 2 0 1 0 Y
	State Zip Code PA 19153			Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental				430.46
Candidate Name			tegory/	
Senate	ment For: Primary General	<u>'</u>	урс	Memo Entry
State: President District:	Other (specify)			
SUBTOTAL of Disbursements This Page (optional) .		<u></u>	▶	0.00

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	NUMBER: PAGE 220 / 260 y one)
ITEMIZED DISBURSEMENTS	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	DUNT	
Full Name (Last, First, Middle Initial) AVIS-RENT-A-CAR			Transaction ID: SB21B-2509-80000 Date of Disbursement
Mailing Address 7000 NE AIRPORT WAY			12 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code OR 97218		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental			1642.72
Candidate Name		Category/ Type	MENO ITEM
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		[MEMO ITEM] Memo Entry
State: District:			
Full Name (Last, First, Middle Initial) AVIS-RENT-A-CAR			Transaction ID: SB21B-2509-90000 Date of Disbursement
Mailing Address 411 Minnesota St			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 5 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
,	State Zip Code MN 55101		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental			1352.11
Candidate Name		Category/ Type	[MEMO ITEM]
Senate President	ment For: Primary General Other (specify) ▼		Memo Entry
State: District:			
Full Name (Last, First, Middle Initial) Avis Rent-A-Car			Transaction ID: SB21B-2509-100000 Date of Disbursement
Mailing Address 100 S French Street			12 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	State Zip Code DE 19801		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental			1580.59
Candidate Name		Category/ Type	MENO ITEM
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		[MEMO ITEM] Memo Entry
State: District:	· · · · · · · · · · · · · · · · · · ·		
SUBTOTAL of Disbursements This Page (optional) .		<b>)</b>	0.00

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SCHEDULE B (FEC Form 3X)	Use separate scriedule(s)   (alabala		IE NUMBER:	/ 260		
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check o	22 23	3 24 8b 28c	25 29	26 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name		by any persoi	n for the purpose	of soliciting co	ntributions	
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACCO	DUNT				
Full Name (Last, First, Middle Initial) Avis Rent-A-Car Tolls			Transaction Date of Disb	DID: SB21B pursement	3-2509-1 2 0 1 (	
Mailing Address P.O. Box 222209			12	15	2010	)
City Great Neck	State Zip Code NY 11022		Amount of E	ach Disburser		
Purpose of Disbursement Car Rental					27.25	
Candidate Name		Category/ Type	IMENO ITE			
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)		Memo Entry			
Full Name (Last, First, Middle Initial)			Transaction	I <b>D</b> : SB21B	B-2307	
Heather Bene			Date of Disb	oursement		V
Mailing Address 19420 SE 205h Street, A	Apt G65		12 /	20 / Y	ž 0 1 (	י נ
City Camas	State Zip Code WA 98607		Amount of E	ach Disburser	ment this I	Period
Purpose of Disbursement	30007				13.99	)
Travel Expense Candidate Name		Category/ Type				
Office Sought:    House   Disburs     Senate   President     State: District:	ement For:  Primary General  Other (specify)					
Full Name (Last, First, Middle Initial) Heather Bene			Transaction Date of Disb	ID: SB21B	3-2308	
Mailing Address 19420 SE 205h Street, A	Apt G65		12 /	20 / Y	ž 0 1 (	) Y
City Camas	State Zip Code WA 98607		Amount of E	ach Disburser	ment this I	Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			T L		500.00	)
Candidate Name		Category/ Type				
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)	ı ype				
State: District:	- (-P J) <b>V</b>					
SUBTOTAL of Disbursements This Page (optional)					513.99	

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SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only X 21b 27	
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCC	UNT	
Full Name (Last, First, Middle Initial) Heather Bene			Transaction ID: SB21B-2309 Date of Disbursement
Mailing Address 19420 SE 205h Street, A	pt G65		12 20 2010
City Camas	State Zip Code WA 98607		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			80.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: CD01D 0010
Heather Bene			Transaction ID: SB21B-2310 Date of Disbursement
Mailing Address 19420 SE 205h Street, A	pt G65		$\begin{bmatrix}\begin{smallmatrix}M&2&M\\1&2&0\end{smallmatrix}\end{bmatrix} \ \ \begin{bmatrix}\begin{smallmatrix}D&D&D\\2&0\end{smallmatrix}\end{bmatrix} \ \ \ \begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y\\2&0&1&0\end{smallmatrix}\end{bmatrix} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$
City	State Zip Code		Amount of Each Disbursement this Period
Camas Purpose of Disbursement	WA 98607		400.00
Travel & Subsistence Expense Reimb			
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
ALAN BRAY			Transaction ID: SB21B-2311 Date of Disbursement
Mailing Address 14 Q Street NE, UNIT B			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 & M \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 0 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
City Washington	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			53.50
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	36.5	
State: District:			
SUBTOTAL of Disbursements This Page (optional)			533.50

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ago,, 11000120010			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s)		NUMBER: PAGE 223 / 260 / one) 22
Any Information copied from such Reports and Statem		by any parson f	28a 28b 28c 29 30b
or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	TNUC	
Full Name (Last, First, Middle Initial) ALAN BRAY			Transaction ID: SB21B-2312 Date of Disbursement
Mailing Address 14 Q Street NE, UNIT B			1 2 D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			50.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2313
ALAN BRAY			Date of Disbursement
Mailing Address 14 Q Street NE, UNIT B			12 M / 20 / Y 2010 Y
,	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement		· · ·	500.00
Travel & Subsistence Expense Reimb  Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify) ▼		
State: District: Full Name (Last, First, Middle Initial)			
JODI DENTON			Transaction ID: SB21B-2314 Date of Disbursement
Mailing Address 2928 Franklin Street			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
	State Zip Code CO 80205		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			129.76
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	Calier (Specify)		
SUBTOTAL of Disbursements This Page (optional) .			679.76

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

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SCHEDULE B (FEC Form 3X)		1	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	
II EMIZED DISBURSEMEN IS	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) JODI DENTON			Transaction ID: SB21B-2315 Date of Disbursement
Mailing Address 2928 Franklin Street			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 0 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Denver	State Zip Code CO 80205		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			46.00
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) JODI DENTON			Transaction ID: SB21B-2316 Date of Disbursement
Mailing Address 2928 Franklin Street			1 2 D / Y Y Y Y Y Y Y
City Denver	State Zip Code CO 80205		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			700.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For:    Primary		
State: District:	-		
Full Name (Last, First, Middle Initial) DAVID GREELISH			Transaction ID: SB21B-2317 Date of Disbursement
Mailing Address 69 Galen Street, #5			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 & M \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & D \\ Y & Z & D & Y \end{smallmatrix} \end{bmatrix}$
City Watertown	State Zip Code MA 02472		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			55.00
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District:			
SURTOTAL of Dishursements This Page (optional)			801.00

C.

SCHEDULE B (FEC Form 3X)		FORLINE	NUMBER. DACE 205/200
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)			
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) DAVID GREELISH			<b>Transaction ID:</b> SB21B-2318 Date of Disbursement
Mailing Address 69 Galen Street, #5			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 12 & M \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} D & D \\ 20 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y \\ 2010 & 10 \end{bmatrix}$
City Watertown	State Zip Code MA 02472		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			426.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	-		
Full Name (Last, First, Middle Initial) DURWIN LAIRY			Transaction ID: SB21B-2319 Date of Disbursement
Mailing Address 1006 EAST 11TH STRE	ĒT .		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 & M \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
City NORTH LITTLE ROCK	State Zip Code AR 72114		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			50.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) DURWIN LAIRY			Transaction ID: SB21B-2320 Date of Disbursement
Mailing Address 1006 EAST 11TH STRE	ΞΤ		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 12 & M \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} D & D \\ 20 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y \\ 2010 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y \\ 2010 & Y & Y & Y & Y \end{bmatrix}$
City NORTH LITTLE ROCK	State Zip Code AR 72114		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			330.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	- · · · · ·		
SURTOTAL of Dichursements This Page (ontional)			806.00

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SCHEDULE B (FEC Form 3X)	IZED DISBURSEMENTS    See Separate Scriedule(S)   (check   X   21 )			NE NUMBER: PAGE 226 / 260 only one)											
ITEMIZED DISBURSEMENTS			i — -		F	22 28a		23 28b		24 28c		25 29	$\boldsymbol{\sqcup}$	26 30b	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name														;	
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL	OFFSET ACC	OUN	N <sup>-</sup>	Γ										
Full Name (Last, First, Middle Initial) DURWIN LAIRY  Mailing Address 1006 EAST 11TH STREE	ΞT								sburs				0 1 (	Y	'
,	State AR	Zip Code 72114					Amou	nt o	f Each	Dis	sburse	-			_
Purpose of Disbursement Travel Expense Candidate Name					egory/				•	•		•	50.00	·	
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General ecify) ▼		1 9	ype										
Full Name (Last, First, Middle Initial) DURWIN LAIRY									sburs	_			322 0 1 0	Y	
Mailing Address 1006 EAST 11TH STREE		7in Onda									L				
NÓRTH LITTLE ROCK	State AR	Zip Code 72114					Amou	nt o	reach	DIS	sburse	-			
Purpose of Disbursement Airline Baggage Fees Candidate Name					egory/				•				25.00		
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General ecify) ▼		1 3	ype										
Full Name (Last, First, Middle Initial) DURWIN LAIRY								of D	sburs	eme		3-23	323		
Mailing Address 1006 EAST 11TH STREE	ΞΤ						1 <sup>M</sup> 2	М	<sup>D</sup> 2	2 0	/ Y	ž	0 1 0	Y	
	State AR	Zip Code 72114					Amou	nt o	f Each	Dis	sburse	-			
Purpose of Disbursement Travel & Subsistence Expense Reimb												3	57.00	-	_
Candidate Name					egory/ ype										
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General ecify) ▼													
State: District:	(-15-	· · · •													_
SUBTOTAL of Disbursements This Page (optional) .					. •							4:	32.00		

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30c
Any Information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	UNT	
Full Name (Last, First, Middle Initial) DURWIN LAIRY			Transaction ID: SB21B-2324 Date of Disbursement
Mailing Address 1006 EAST 11TH STREI	ΞΤ		$\begin{bmatrix} 1 & 2 & 0 \\ 1 & 2 & 0 \end{bmatrix} \begin{bmatrix} 1 & 2 & 0 \\ 2 & 0 \end{bmatrix} \begin{bmatrix} 1 & 2 & 0 & 1 \\ 2 & 0 & 1 & 0 \end{bmatrix}$
City NORTH LITTLE ROCK	State Zip Code AR 72114		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense	7	· ·	50.00
Candidate Name	L	Category/ Type	
Office Sought: House Disburse Senate President State: District:	ement For:  Primary General  Other (specify)	Турс	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2325
DURWIN LAIRY			Date of Disbursement
Mailing Address 1006 EAST 11TH STREI	ΞΤ		1 2 D D D Y 2 0 1 0 Y
City NORTH LITTLE ROCK	State Zip Code AR 72114		Amount of Each Disbursement this Period
Purpose of Disbursement	Γ		25.00
Airline Baggage Fees Candidate Name	L	Category/ Type	
Senate President	ement For: Primary General Other (specify)	. 7/-	
State: District:  Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2326
DURWIN LAIRY			Date of Disbursement
Mailing Address 1006 EAST 11TH STREI	ΞΤ		$\begin{bmatrix} M & M \\ 12 & M \end{bmatrix} / \begin{bmatrix} D & D \\ 20 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2010 \end{bmatrix}$
City NORTH LITTLE ROCK	State Zip Code AR 72114		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb	]		396.00
Candidate Name	-	Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	Nr	
State: District:	•		

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	NUMBER: PAGE 228 / 260 / one)
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) DURWIN LAIRY			Transaction ID: SB21B-2327 Date of Disbursement
Mailing Address 1006 EAST 11TH STREE	T		12 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code AR 72114		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		•	50.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2328
DURWIN LAIRY			Date of Disbursement
Mailing Address 1006 EAST 11TH STREE	ET		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 12 & M \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 20 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2010 \end{bmatrix} $
,	State Zip Code AR 72114		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees		• •	25.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify) ▼		
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2329
DURWIN LAIRY			Date of Disbursement
Mailing Address 1006 EAST 11TH STREE	:T		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
	State Zip Code AR 72114		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			600.00
Candidate Name		Category/	
Senate	ment For: Primary General	Туре	
President  State: District:	Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	675.00

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

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SCHEDULE B (FEC Form 3X)	Ose separate scriedule(s) (chec						UMBE	R:		Р	AGE	229	260
ITEMIZED DISBURSEMENTS	Detailed Summary Page  To reach category of the Detailed Summary Page			_	F	22 28a	П	23 28b	24 28c		25 29	26 30b	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name													<b>5</b>
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL	OFFSET ACC	NUO	N <sup>-</sup>	Γ								
Full Name (Last, First, Middle Initial) Nicole Lynch  Mailing Address 7 Avenue A, 2nd Floor							Date o		on ID:			330 2 o 1 o	) <sup>Y</sup>
	State NY	Zip Code 10009					Amou	nt o	f Each	Disburs	emer	nt this I	Period
Purpose of Disbursement Travel Expense Candidate Name					egory/			•			•	24.00	)
Office Sought: House Senate President State: District:	ment For: Primary Other (spe	General ecify) ▼			,,,,,								
Full Name (Last, First, Middle Initial) Cole Randle  Mailing Address 8200 Wisconsin Ave., #1	417						Date o		sburse	SB21 ement		331 2 0 1 (	) <sup>Y</sup>
City	State MD	Zip Code 20814					Amou	nt o	f Each	Disburs	emer	nt this I	Period
Purpose of Disbursement Airline Baggage Fees Candidate Name	IVID	20014			egory/						1	20.00	)
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General ecify) ▼		•	,,,,								
Full Name (Last, First, Middle Initial) Cole Randle							Date o	of D	sburse		B-2	332	
Mailing Address 8200 Wisconsin Ave., #1	417						<sup>M</sup> 2	М	2	0 /	YZ	2 0 1 (	) <sup>Y</sup>
Bethesda	State MD	Zip Code 20814					Amou	nt o	f Each	Disburs			
Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name					egory/			•			4	100.00	2
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General			·								
State: District:												44.5	
SUBTOTAL of Disbursements This Page (optional) .					. <b>•</b>						5	44.00	)

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	NUMBER: PAGE 230 / 260
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		by any person f	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) IAN ROSE			Transaction ID: SB21B-2333 Date of Disbursement
Mailing Address 147 D Street, SE			$\begin{bmatrix} M & M \\ 1 & 2 \end{bmatrix} & \begin{bmatrix} D & D \\ 2 & 0 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
,	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement Events-Site Supplies		• •	46.68
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)	,	
Full Name (Last, First, Middle Initial) IAN ROSE			Transaction ID: SB21B-2334 Date of Disbursement
Mailing Address 147 D Street, SE			1 2 D D D Y 2 0 1 0 Y
,	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			48.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) IAN ROSE			Transaction ID: SB21B-2335 Date of Disbursement
Mailing Address 147 D Street, SE			12 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement			25.00
Airline Baggage Fees Candidate Name		Category/	
Office Sought: House Disburse Senate President	ment For: Primary General	Туре	
State: District:	Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	119.68

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

В.

C.

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 231 / 260						
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only							
TI EIMIZED DIODOTTOEMENTO	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b						
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name									
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT							
Full Name (Last, First, Middle Initial) IAN ROSE			Transaction ID: SB21B-2336 Date of Disbursement						
Mailing Address 147 D Street, SE			12 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	State Zip Code DC 20003		Amount of Each Disbursement this Period						
Purpose of Disbursement Travel & Subsistence Expense Reimb		•	280.50						
Candidate Name		Category/ Type							
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)								
State: District:									
Full Name (Last, First, Middle Initial) IAN ROSE			Transaction ID: SB21B-2337 Date of Disbursement						
Mailing Address 147 D Street, SE			1 2 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
•	State Zip Code DC 20003		Amount of Each Disbursement this Period						
Purpose of Disbursement Travel Expense		•	3.00						
Candidate Name		Category/ Type							
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)								
State: District:									
Full Name (Last, First, Middle Initial) IAN ROSE			Transaction ID: SB21B-2338 Date of Disbursement						
Mailing Address 147 D Street, SE			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 & M \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 2 & 0 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $						
	State Zip Code DC 20003		Amount of Each Disbursement this Period						
Purpose of Disbursement Travel & Subsistence Expense Reimb		0 0	231.00						
Candidate Name		Category/ Type							
Senate President	ment For: Primary General Other (specify)								
State: District:									
SURTOTAL of Dishursements This Page (ontional)			514.50						

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

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age# 11990129001			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page		
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam		y any person for th	e purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCOU	JNT	
Full Name (Last, First, Middle Initial) JESSE J ROSEN			ransaction ID: SB21B-2339 Date of Disbursement
Mailing Address 1045 W. County Line Ro	ad	L.	12 M / 20 / Y 2010 Y
City Bayside	State Zip Code WI 53217	A	mount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		<del> </del> [	335.21
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
JESSE J ROSEN			ransaction ID: SB21B-2340 Date of Disbursement
Mailing Address 1045 W. County Line Ro	ad		$ \begin{bmatrix} \begin{smallmatrix} M \\ 1 \end{smallmatrix} 2 \begin{bmatrix} M \\ M \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} D \\ 2 \end{smallmatrix} 0 \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y \\ 2 \end{smallmatrix} 0 \begin{bmatrix} 1 \\ 1 \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y \\ 2 \end{smallmatrix} 0 \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y \\ 1 \end{smallmatrix} \end{bmatrix} $
City Bayside	State Zip Code WI 53217	Д	mount of Each Disbursement this Period
Purpose of Disbursement	WI 30217	<del></del>	800.00
Travel & Subsistence Expense Reimb  Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) CATHERINE S. WELKER			ransaction ID: SB21B-2341 Date of Disbursement
Mailing Address 302 Kentucky Avenue SE	=		$ \begin{bmatrix} M & M \\ 1 & 2 \end{bmatrix} \begin{bmatrix} D & D \\ 2 & 0 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y &$
City Washington	State Zip Code DC 20003	A	mount of Each Disbursement this Period
Purpose of Disbursement Events-Site Supplies			10.90
Candidate Name	-	Category/ Type	
Office Sought: House Disburse Senate President	ement For:  Primary  Other (specify)	76-	
State: District:			
SUBTOTAL of Disbursements This Page (optional)		<u>+</u> [	1146.11

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	TRAVEL OFFSET ACCOL	JNT	
Full Name (Last, First, Middle Initial) CATHERINE S. WELKER			Transaction ID: SB21B-2342 Date of Disbursement
Mailing Address 302 Kentucky Avenue SI	 E		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Washington	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		•	41.00
Candidate Name	C	Category/ Type	
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)	7,72	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2343
CATHERINE S. WELKER			Date of Disbursement
Mailing Address 302 Kentucky Avenue SI			$ \begin{bmatrix} M & M \\ 1 & 2 \end{bmatrix}  \begin{bmatrix} D & D & V \\ 2 & 0 \end{bmatrix}  \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $
City Washington	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			600.00
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)	71	
State: District: Full Name (Last, First, Middle Initial)			Turner all and ID CODOLD COLL
CATHERINE S. WELKER			Transaction ID: SB21B-2344 Date of Disbursement
Mailing Address 302 Kentucky Avenue SI	=		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 12 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 20 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 201 \end{smallmatrix} \end{bmatrix} \ )$
City Washington	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			34.85
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	71	
State: District:			

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	7 one)
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		d by any person fo	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	and dadress of any pointed		ion contributions from sacri committee
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) CATHERINE S. WELKER			Transaction ID: SB21B-2345 Date of Disbursement
Mailing Address 302 Kentucky Avenue SE	<u> </u>		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 12 \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 20 \end{smallmatrix} \end{bmatrix} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$
City Washington	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			600.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) CATHERINE S. WELKER			Transaction ID: SB21B-2346 Date of Disbursement
Mailing Address 302 Kentucky Avenue SE	<u> </u>		$\begin{bmatrix} M & M \\ 1 & 2 & M \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ 2 & 0 \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $
City Washington	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			24.50
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	,	
State: District:			
Full Name (Last, First, Middle Initial) CATHERINE S. WELKER			<b>Transaction ID:</b> SB21B-2347 Date of Disbursement
Mailing Address 302 Kentucky Avenue SE	Ē		12 D 2 D 7 2 0 1 0 Y
City Washington	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			500.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
SURTOTAL of Dishursements This Page (ontional)			1124.50

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 235 / 260			
ITEMIZED DISBURSEMENTS	for each category of the	(check only	one) 7 22	24			
	Detailed Summary Page			28c   29   30b			
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT					
Full Name (Last, First, Middle Initial)			Transaction ID: S	B21B-2348			
CATHERINE S. WELKER			Date of Disbursemen	nt			
Mailing Address 302 Kentucky Avenue SE	<u> </u>		12  20	2010			
City Washington	State Zip Code DC 20003		Amount of Each Disk	oursement this Period			
Purpose of Disbursement Travel Expense				36.00			
Candidate Name		Category/ Type					
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)						
State: District:							
Full Name (Last, First, Middle Initial) CATHERINE S. WELKER			Transaction ID: SI Date of Disbursemen	nt			
Mailing Address 302 Kentucky Avenue SE			12 M / 20	ŽOŽOŠ			
City Washington	State Zip Code DC 20003		Amount of Each Disk	oursement this Period			
Purpose of Disbursement Travel & Subsistence Expense Reimb				700.00			
Candidate Name		Category/ Type					
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	71-					
State: District:	· 						
Full Name (Last, First, Middle Initial) CATHERINE S. WELKER			Transaction ID: SI Date of Disbursemen				
Mailing Address 302 Kentucky Avenue SE	<u> </u>		$\begin{bmatrix} 1 & 2 & M \end{bmatrix}$	2010			
	State Zip Code DC 20003		Amount of Each Disk	oursement this Period			
Purpose of Disbursement Travel Expense				32.00			
Candidate Name		Category/ Type					
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)						
State: District:							
SURTOTAL of Dishursements This Page (ontional)				768.00			

C.

SCHEDULE B (FEC Form 3X)	IZED DISBURSEMENTS   To each category of the				7 .		E NUMBER: PAGE 236 / 260								
ITEMIZED DISBURSEMENTS				21b 27	F	22 28a		23 28b		24 28c	F	25 29	$\square$	26 30b	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name														5	
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL	OFFSET ACC	OUN	٧	Γ										
Full Name (Last, First, Middle Initial) CATHERINE S. WELKER  Mailing Address 302 Kentucky Avenue SE							Date o			en			351 0 1 0	) <sup>Y</sup>	
City	State DC	Zip Code 20003					Amou	nt o	Each	n D	isburse	men	t this f	Period	<u></u>
Purpose of Disbursement Travel & Subsistence Expense Reimb		20000		•	•							6	00.00		
Candidate Name					egory/ ype										
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General cify) ▼													
Full Name (Last, First, Middle Initial) CATHERINE S. WELKER							Date o	of D		en				V	
Mailing Address 302 Kentucky Avenue SE							1 2	М	2	2 0		Ž	0 i 0	)	
,	State DC	Zip Code 20003					Amou	nt o	Each	ı D	isburse				d l
Purpose of Disbursement Travel Expense									_				21.00		
Candidate Name					egory/ ype										
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General cify) ▼													
Full Name (Last, First, Middle Initial) CATHERINE S. WELKER							Trans				SB21	3-23	353		
Mailing Address 302 Kentucky Avenue SE								и	D 2	-		Ž	0 1 C	) Y	
	State DC	Zip Code 20003					Amou	nt o	Each	n D	)isburse	-		-	d I
Purpose of Disbursement Airline Baggage Fees								-					25.00		
Candidate Name					egory/ /pe										
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General cify) ▼													
State: District:		•					_			_		_			_
SUBTOTAL of Disbursements This Page (optional) .					. ▶		L					6	46.00		

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the	(check only	<sup>7 one)</sup> ☐ 22
	Detailed Summary Page		28a 28b 28c 29 30
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2354
CATHERINE S. WELKER			Date of Disbursement
Mailing Address 302 Kentucky Avenue SE	<u> </u>		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
City Washington	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		•	500.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	,	
State: District:			
Full Name (Last, First, Middle Initial) CATHERINE S. WELKER			Transaction ID: SB21B-2355 Date of Disbursement
Mailing Address 302 Kentucky Avenue SE			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} Y$
City Washington	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement			101.63
Travel Expense Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	,	
State: District:	· 		
Full Name (Last, First, Middle Initial) CATHERINE S. WELKER			<b>Transaction ID:</b> SB21B-2356 Date of Disbursement
Mailing Address 302 Kentucky Avenue SE	<u> </u>		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 12 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 20 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 20 & 10 \end{smallmatrix} \end{bmatrix} \ \ \\$
City Washington	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			50.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
SURTOTAL of Dishursements This Page (ontional)			651.63

В.

C.

SCHEDULE B (FEC Form 3X)	Han annual anti-day ( )	FOR LINE N	NUMBER: PAGE 238 / 260
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	e and address of any political	COMMITTILLEE TO SOM	Cit contributions from such committee
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) CATHERINE S. WELKER			Transaction ID: SB21B-2357
			Date of Disbursement  1 2 2 0 2 0 1 0
Mailing Address 302 Kentucky Avenue SE	<u> </u>		12 20 10
,	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement		· ·	392.00
Travel & Subsistence Expense Reimb  Candidate Name		Category/	
		Type	
Office Sought: House Disburse	ment For:    Primary   General		
President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Edward Allen			Transaction ID: SB21B-2358 Date of Disbursement
Mailing Address 1636 N. Fairfax Avenue			12 D 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Otata 7in Oada		A second of Facts Points are stable Points
,	State Zip Code CA 90046		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			12.95
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate	ment For:  Primary General		
President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Edward Allen			Transaction ID: SB21B-2359 Date of Disbursement
Mailing Address 1636 N. Fairfax Avenue			$\begin{bmatrix}\begin{smallmatrix}M\\1&2\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}D\\2&1\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}Y\\2&0\end{smallmatrix}\end{bmatrix}^Y$
	State Zip Code		Amount of Each Disbursement this Period
Los Angeles Purpose of Disbursement	CA 90046		500.00
Travel & Subsistence Expense Reimb			
Candidate Name		Category/ Type	
° 🗎	ment For:	71	
Senate President	Primary General Other (specify) ▼		
State: District:	(opso)/ <b>\</b>		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	904.95

C.

290" 1100012000 1			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	NUMBER: PAGE 239 / 260 y one)
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) HANNAH EDWARDS			Transaction ID: SB21B-2360 Date of Disbursement
Mailing Address 432 10th Street, NE			12
,	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		• •	118.44
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Michael Epstein			Transaction ID: SB21B-2361 Date of Disbursement
Mailing Address 134 Oxford Drive			$\begin{bmatrix} \begin{smallmatrix} M \\ 1 \end{smallmatrix} 2^{M} & \begin{smallmatrix} M \\ \end{smallmatrix} 2^{M} & \begin{smallmatrix} D \\ 2 \end{smallmatrix} 2^{D} & \begin{smallmatrix} Y \\ 2 \end{smallmatrix} 2^{N} 2^{Y} 0^{Y} \\ \end{bmatrix}$
,	State Zip Code NJ 07670		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		•	202.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Michael Faulman			Transaction ID: SB21B-2362 Date of Disbursement
Mailing Address 6145 Chamonix Court SE	<u> </u>		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 12 \end{smallmatrix} \end{bmatrix}^M \begin{bmatrix} \begin{smallmatrix} D & D \\ 21 \end{smallmatrix} \end{bmatrix}^M \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2010 \end{smallmatrix} \end{bmatrix}^Y$
	State Zip Code MI 49546		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			19.36
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	71	
State: District:	Caron (openiny) ▼		
SUBTOTAL of Disbursements This Page (optional) .		<b>)</b>	339.80

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

C.

SCHEDULE B (FEC Form 3X)		1		D.05 010 (000
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only		PAGE 240 / 260
II EMIZED DISBURSEMENTS	Detailed Summary Page	X 21b 27		24 25 26 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT		
Full Name (Last, First, Middle Initial) Michael Faulman			Transaction ID: SE Date of Disbursemen	
Mailing Address 6145 Chamonix Court SE			12 / 21	Y 2010 Y
•	State Zip Code MI 49546		Amount of Each Disb	
Purpose of Disbursement Airline Baggage Fees				22.00
Candidate Name		Category/ Type		
Senate President	ment For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) Michael Faulman			Transaction ID: SE Date of Disbursemen	t
Mailing Address 6145 Chamonix Court SE			12 M / 21	2010
•	State Zip Code MI 49546		Amount of Each Disb	
Purpose of Disbursement Travel & Subsistence Expense Reimb				265.54
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) HORACIO GUTIERREZ			Transaction ID: SE Date of Disbursemen	t
Mailing Address 407 EAST 12TH STREE	Γ#1RSW		12 / 21	2010
	State Zip Code NY 10009		Amount of Each Disb	
Purpose of Disbursement Travel Expense				110.95
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)			
State: District:				
SURTOTAL of Dishursements This Page (ontional)				398.49

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE			
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2366
HORACIO GUTIERREZ			Date of Disbursement
Mailing Address 407 EAST 12TH STREE	T #1RSW		$ \begin{bmatrix} M & M \\ 12 & M \end{bmatrix} / \begin{bmatrix} D & D \\ 21 & M \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y & Y \\ 20 & 10 & M \end{bmatrix} $
City NEW YORK	State Zip Code NY 10009		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees			40.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial) HORACIO GUTIERREZ			Transaction ID: SB21B-2367 Date of Disbursement
Mailing Address 407 EAST 12TH STREE	T #1RSW		$\begin{bmatrix} M & M \\ 1 & 2 \end{bmatrix} \ \ \begin{bmatrix} D & D \\ 2 & 1 \end{bmatrix} \ \ \ \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
City NEW YORK	State Zip Code NY 10009		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			336.00
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
MICHAEL-ANN HADERS			Transaction ID: SB21B-2368 Date of Disbursement
Mailing Address 441 10th Street, NE			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Washington	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			47.76
Candidate Name		Category/ Type	
Office Sought: House Disburs: Senate President	ement For:  Primary General  Other (specify)	Турс	
State: District:			
SUBTOTAL of Disbursements This Page (optional)			423.76

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ago;; 11000120001			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	
II EMIZED DISBURSEMENTS		X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) MICHAEL-ANN HADERS			Transaction ID: SB21B-2369 Date of Disbursement
Mailing Address 441 10th Street, NE			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
,	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement Airline Baggage Fees		• •	25.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)	,	
State: District: Full Name (Last, First, Middle Initial)			
MICHAEL-ANN HADERS			Transaction ID: SB21B-2370 Date of Disbursement
Mailing Address 441 10th Street, NE			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
,	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement Lodging & Catering			402.81
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) MICHAEL-ANN HADERS			Transaction ID: SB21B-2371 Date of Disbursement
Mailing Address 441 10th Street, NE			12 M / D D / Y 2010 Y
	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement			400.00
Travel & Subsistence Expense Reimb  Candidate Name		Category/	
Senate	ment For: Primary General	Туре	
State: President State:	Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	827.81

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

C.

SCHEDIII E B (EEC Form 2V)				
SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	NUMBER: PAGE 243 / 260	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b	
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT		
Full Name (Last, First, Middle Initial) Christina Iskandar			Transaction ID: SB21B-2372 Date of Disbursement	
Mailing Address 924 Finnell Way			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$	
City Placentia	State Zip Code CA 92870		Amount of Each Disbursement this Period	
Purpose of Disbursement Travel Expense			84.31	
Candidate Name		Category/ Type		
Senate President	ement For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) Christina Iskandar			Transaction ID: SB21B-2373 Date of Disbursement	
Mailing Address 924 Finnell Way			$ \begin{bmatrix} M & M \\ 1 & 2 \end{bmatrix} $ $ \begin{bmatrix} D & D \\ 2 & 1 \end{bmatrix} $ $ \begin{bmatrix} Y & Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $	
City Placentia	State Zip Code CA 92870		Amount of Each Disbursement this Period	
Purpose of Disbursement Airline Baggage Fees			48.00	
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) Christina Iskandar			Transaction ID: SB21B-2374 Date of Disbursement	
Mailing Address 924 Finnell Way			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$	
City Placentia	State Zip Code CA 92870		Amount of Each Disbursement this Period	
Purpose of Disbursement Travel & Subsistence Expense Reimb			700.00	
Candidate Name		Category/ Type		
Senate President	ement For: Primary General Other (specify)			
State: District:				
SURTOTAL of Dichursements This Page (ontional)			832.31	

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	NUMBER: PAGE 244 / 260
ITEMIZED DISBURSEMENTS	for each category of the	(check only	rone) 7 22
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2375
Nicole Lynch			Date of Disbursement
Mailing Address 7 Avenue A, 2nd Floor			$\begin{bmatrix} 1 & 2 & M \\ 1 & 2 & M \end{bmatrix} / \begin{bmatrix} D & D \\ 2 & 1 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
•	State Zip Code NY 10009		Amount of Each Disbursement this Period
Purpose of Disbursement		0 0	19.75
Events-Site Supplies Candidate Name		Category/	
		Туре	
Office Sought: House Disburse Senate	ment For:  Primary General		
President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Nicole Lynch			Transaction ID: SB21B-2376 Date of Disbursement
			12
Mailing Address 7 Avenue A, 2nd Floor			21 2010
	State Zip Code NY 10009		Amount of Each Disbursement this Period
Purpose of Disbursement	10000	•	61.00
Travel Expense Candidate Name		Cotogony	
		Category/ Type	
Office Sought: House Disburse Senate	ment For:  Primary General		
President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Katherine Lyons Hahn			Transaction ID: SB21B-2377 Date of Disbursement
Mailing Address 2275 Broadway Street, A	pt 208		$\begin{bmatrix}\begin{smallmatrix}M&M&M\\1&2&\end{smallmatrix}\end{bmatrix} \ \begin{bmatrix}\begin{smallmatrix}D&D&D\\2&1&\end{smallmatrix}\end{bmatrix} \ \begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y\\2&0&1&0\end{smallmatrix}\end{bmatrix}$
	•		Assert (Fack Pickers and this Paid
	State Zip Code CA 94115		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			532.50
Candidate Name		Category/	
Office Cought. Have	mont For:	Туре	
Office Sought: House Disburse Senate	ment For:  Primary General		
President Dietrict:	Other (specify)		
State: District:			
SUBTOTAL of Disbursements This Page (optional) .			613.25

C.

196# 11990129100			
SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page		
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name		y any person for t	he purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACCO	UNT	
Full Name (Last, First, Middle Initial) GREG MAYS			Transaction ID: SB21B-2378 Date of Disbursement  1 2 2 1 2 2 0 1 0
Mailing Address PO BOX 25153			12 21 2010
City WASHINGTON	State Zip Code DC 20007	,	Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense			28.20
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial) GREG MAYS			Transaction ID: SB21B-2379 Date of Disbursement    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
Mailing Address PO BOX 25153			12 21 2010
City WASHINGTON	State Zip Code DC 20007		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			118.44
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)		7	Fransaction ID: SB21B-2380
PAUL NEAVILLE			Date of Disbursement
Mailing Address 4324 BRANDYWINE ST	REET, NW		12 M / 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City WASHINGTON	State Zip Code DC 20016	,	Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			700.00
Candidate Name		Category/ Type	
Office Sought: House Disburs: Senate President	ement For: Primary General Other (specify)		
State: District:	_ ` · · · · · ·		
SUBTOTAL of Disbursements This Page (optional)		<u>•</u>	846.64

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I		PAGE 246 / 260
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only X 21b 27	one) 22 23 28a 28b	24 25 26 28c 29 30
Any Information copied from such Reports and Stater				
r for commercial purposes, other than using the nam	e and address of any political col	mmittee to soli	cit contributions fi	rom such committee
NAME OF COMMITTEE (In Full)  DEMOCRATIC NATIONAL COMMITTEE	TRAVEL OFFSET ACCOL	JNT		
Full Name (Last, First, Middle Initial) Brendan Olsen			Transaction ID Date of Disburs	: SB21B-2381 ement
Mailing Address 20 Baltic Avenue			12 D	21
City North Easton	State Zip Code MA 02356		Amount of Each	n Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb				400.00
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)			
Full Name (Last, First, Middle Initial) Brendan Olsen			Transaction ID Date of Disburs	: SB21B-2382
Mailing Address 20 Baltic Avenue			12 / 2	21 2010
City North Easton	State Zip Code MA 02356		Amount of Each	n Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb				500.00
Candidate Name		Category/ Type		
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)			
Full Name (Last, First, Middle Initial) John Oxtoby			Transaction ID Date of Disburs	: SB21B-2383 sement
Mailing Address 345 N. College Avenue			12 M	21
City Claremont	State Zip Code CA 91711		Amount of Each	n Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb				603.50
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)			
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>		1503.50
TOTAL This Period (last page this line number only)				
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 247/26	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	_
	Detailed Summary Page	X 21b 27	22 23 24 25 28a 28b 28c 29	26 30
Any Information copied from such Reports and Statem or for commercial purposes, other than using the nam		d by any person f	or the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full)	· · · · · · · · · · · · · · · · · · ·			
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT		
Full Name (Last, First, Middle Initial) Scott Pollard			<b>Transaction ID:</b> SB21B-2384 Date of Disbursement	
Mailing Address 2901 Barton Skyway, #1	711		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} $	
City Austin	State Zip Code TX 78746		Amount of Each Disbursement this Period	od
Purpose of Disbursement Travel & Subsistence Expense Reimb			461.50	
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) Evelyn Marie Prentice			Transaction ID: SB21B-2385 Date of Disbursement	
Mailing Address 634 Kling Street, Apt A			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix}$	
City Akron	State Zip Code OH 44311		Amount of Each Disbursement this Period	od
Purpose of Disbursement Events-Site Supplies			34.13	
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) Evelyn Marie Prentice			<b>Transaction ID:</b> SB21B-2386 Date of Disbursement	
Mailing Address 634 Kling Street, Apt A			12 21 7 2010	
City Akron	State Zip Code OH 44311		Amount of Each Disbursement this Period	od
Purpose of Disbursement Travel Expense			23.28	
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)			
State: District:	· · · · · · · · · · · · · · · · · · ·			
SURTOTAL of Dichursements This Page (ontional)			518.91	

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only	
		X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) Evelyn Marie Prentice			Transaction ID: SB21B-2387 Date of Disbursement
Mailing Address 634 Kling Street, Apt A			12 7 2 1 7 2 0 1 0
,	State Zip Code OH 44311		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		, ,	300.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Bradford A. Simmons			Transaction ID: SB21B-2388 Date of Disbursement
Mailing Address 6310 Mossway			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
,	State Zip Code MD 21212		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		0 0	40.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Bradford A. Simmons			Transaction ID: SB21B-2389 Date of Disbursement
Mailing Address 6310 Mossway			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
	State Zip Code MD 21212		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb			500.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	· · · · · · · · · · · · · · · · · · ·		
SUBTOTAL of Disbursements This Page (optional) .		<b>)</b>	840.00

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

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	
		27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	DUNT	
Full Name (Last, First, Middle Initial) Jane Campbell Spencer			Transaction ID: SB21B-2390 Date of Disbursement
Mailing Address 120 6TH STREET, SE			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
,	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement Travel & Subsistence Expense Reimb		· ·	96.08
Candidate Name		Category/ Type	
Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
Jane Campbell Spencer			Transaction ID: SB21B-2391 Date of Disbursement
Mailing Address 120 6TH STREET, SE			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
•	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense		•	71.04
Candidate Name		Category/ Type	
Office Sought: House Disburser Senate President	ment For: Primary General Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) Jane Campbell Spencer			Transaction ID: SB21B-2392 Date of Disbursement
Mailing Address 120 6TH STREET, SE			$\begin{bmatrix} 1 & 2 & M \\ 1 & 2 & M \end{bmatrix} / \begin{bmatrix} D & D \\ 2 & 1 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement Lodging & Catering			258.46
Candidate Name		Category/ Type	
Office Sought: House Disbursel Senate President	ment For: Primary General Other (specify)		
State: District:	<b>□</b>		
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	425.58

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

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

FOR LINE NUMBER: PAGE 250 / 260 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b 22 23 24 25 26 Detailed Summary Page 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-2508 AMERICAN EXPRESS Date of Disbursement 2 1 **1** 2 2010 Mailing Address P O BOX 1270 Zip Code City State Amount of Each Disbursement this Period **NÉWARK** NJ 07101 95710.14 Purpose of Disbursement Prepaid Expenses Candidate Name Category/ Type Office Sought: Disbursement For: House See Attached Memo Entry General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-2508-10000 Avis Rent-A-Car Tolls Date of Disbursement 2 1 2010 Mailing Address P.O. Box 222209 City State Zip Code Amount of Each Disbursement this Period Great Neck NY 11022 8.00 Purpose of Disbursement Car Rental Candidate Name Category/ Type [MEMO ITEM] Office Sought: House Disbursement For: Memo Entry Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-2508-20000 **Budget Rent-A-Car** Date of Disbursement 2 1 2010 Mailing Address 1000 Turnage Blvd City State Zip Code Amount of Each Disbursement this Period West Palm Beach FL 33406 232.32 Purpose of Disbursement Car Rental Candidate Name Category/ Type [MEMO ITEM] Office Sought: House Disbursement For: Memo Entry Senate Primary General President Other (specify) State: District:

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

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

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s)	_	NUMBER: PAGE 251 / 260
	for each category of the	(check only	
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	TAUC	
Full Name (Last, First, Middle Initial) CAESARS HOTEL			Transaction ID: SB21B-2508-30000 Date of Disbursement
Mailing Address 3555 LAS VEGAS BLVD.	, S		12 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code NV 89109		Amount of Each Disbursement this Period
Purpose of Disbursement Lodging & Catering			18743.69
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	,,	[MEMO ITEM] Memo Entry
State: District:			
Full Name (Last, First, Middle Initial) Crowne Plaza Hotel Englewood			Transaction ID: SB21B-2508-40000 Date of Disbursement
Mailing Address 401 South Van Brunt St			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
,	State Zip Code NJ 07631		Amount of Each Disbursement this Period
Purpose of Disbursement			7451.81
Lodging & Catering  Candidate Name		Category/ Type	IMENO ITEM
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼		[MEMO ITEM] Memo Entry
Full Name (Last, First, Middle Initial)			Transaction ID: CD01D 0500 50000
Fairfield Inn by Marriott			Transaction ID: SB21B-2508-50000 Date of Disbursement
Mailing Address 11929 NE Airport Way			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
	State Zip Code OR 97220		Amount of Each Disbursement this Period
Purpose of Disbursement Lodging & Catering			445.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate	Primary General	1,700	[MEMO ITEM] Memo Entry
President State: District:	Other (specify)		
SUBTOTAL of Disbursements This Page (optional) .			0.00

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	NUMBER: PAGE 252 / 260 / one) 22
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	TNUC	
Full Name (Last, First, Middle Initial) Hertz Car Rental			Transaction ID: SB21B-2508-60000 Date of Disbursement
Mailing Address Palm Beach Intl Airport 3175 Belvedere Rd			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix}$
•	State Zip Code FL 33406		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental		-	634.87
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		[MEMO ITEM] Memo Entry
State: District:			
Full Name (Last, First, Middle Initial) Hertz Rent-A-Car			Transaction ID: SB21B-2508-70000 Date of Disbursement
Mailing Address 2951 Market Street			12 21 7 2010
•	State Zip Code PA 19104		Amount of Each Disbursement this Period
Purpose of Disbursement Car Rental		•	204.65
Candidate Name		Category/ Type	[MEMO ITEM]
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼		Memo Entry
State: District: Full Name (Last, First, Middle Initial)			
Hilton Toledo			Transaction ID: SB21B-2508-80000 Date of Disbursement
Mailing Address 3100 Glendale Avenue			12 D / Y 2010 Y
Toledo	State Zip Code OH 43614		Amount of Each Disbursement this Period
Purpose of Disbursement Lodging & Catering			2197.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	21: -	[MEMO ITEM] Memo Entry
State: District:	outer (apecity) ♥		
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	0.00

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	NUMBER: PAGE 253 / 260
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name	nents may not be sold or used e and address of any political	by any person for committee to so	for the purpose of soliciting contributions slicit contributions from such committee
NAME OF COMMITTEE (In Full)			
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) Holiday Inn University Area			Transaction ID: SB21B-2508-90000 Date of Disbursement
Mailing Address 1901 Emmet Street			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \  \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{smallmatrix} \end{bmatrix} \  \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} \  \   $
City Charlottesville	State Zip Code VA 22901		Amount of Each Disbursement this Period
Purpose of Disbursement Lodging & Catering			2887.83
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)	Туро	[MEMO ITEM] Memo Entry
State: District:			
Full Name (Last, First, Middle Initial) InterContinental Chicago			<b>Transaction ID:</b> SB21B-2508-100000 Date of Disbursement
Mailing Address 505 North Michigan Ave			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix}$
•	State Zip Code		Amount of Each Disbursement this Period
Chicago Purpose of Disbursement	IL 60611		8523.81
Lodging & Catering			
Candidate Name		Category/ Type	[MEMO ITEM]
Senate President	ement For: Primary General Other (specify)		Memo Entry
State: District:			
Full Name (Last, First, Middle Initial) Philadelphia Marriott Downtown			Transaction ID: SB21B-2508-110000 Date of Disbursement
Mailing Address 1201 Market Street			12 M / 21 / Y 2010 Y
City Philadelphia	State Zip Code PA 19107		Amount of Each Disbursement this Period
Purpose of Disbursement Lodging & Catering		•	13212.64
Candidate Name		Category/	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	Туре	[MEMO ITEM] Memo Entry
State: District:	· · · · · · · · · · · · · · · · · · ·		
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	0.00

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only 21b 27	
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name		by any person fo	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL OFFSET ACCC	DUNT	
Full Name (Last, First, Middle Initial) San Francisco Marriott Marquis			Transaction ID: SB21B-2508-120000 Date of Disbursement    M
Mailing Address 55 4th Street  City San Francisco	State Zip Code CA 94103		Amount of Each Disbursement this Period -13591.64
Purpose of Disbursement Lodging & Catering Candidate Name		Category/ Type	
Office Sought:  Senate  President  State:  Disburs  Disburs  District:	ement For: Primary General Other (specify)		[MEMO ITEM] Memo Entry
Full Name (Last, First, Middle Initial) Cleveland Marriott Key Center Mailing Address 127 Public Square			Transaction ID: SB21B-2508-130000 Date of Disbursement  M 2 M / D 2 D / Y Y Y O Y O Y O Y O Y O Y O Y O Y O Y
City Cleveland	State Zip Code OH 44114		Amount of Each Disbursement this Period
Purpose of Disbursement Lodging & Catering Candidate Name		Category/ Type	8183.36
Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)		[MEMO ITEM] Memo Entry
Full Name (Last, First, Middle Initial) West Palm Beach Marriott			Transaction ID: SB21B-2508-140000 Date of Disbursement
Mailing Address 1001 Okeechobee Blvd			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
City West Palm Beach	State Zip Code FL 33401		Amount of Each Disbursement this Period 984.00
Purpose of Disbursement Lodging & Catering Candidate Name		Category/	304.00
Senate President	ement For:    Primary   General     Other (specify)   \(\blace{\Pi}\)	Туре	[MEMO ITEM] Memo Entry
State: District:			
SUBTOTAL of Disbursements This Page (optional)		<b>)</b>	0.00

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACC	OUNT	
Full Name (Last, First, Middle Initial) SHERATON HOTEL			Transaction ID: SB21B-2508-150000 Date of Disbursement
Mailing Address 870 WILLISTON RD			12 M / 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	State Zip Code VT 05403		Amount of Each Disbursement this Period
Purpose of Disbursement Lodging & Catering		•	366.30
Candidate Name		Category/ Type	IMEMO ITEMI
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		[MEMO ITEM] Memo Entry
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B-2508-160000
Sheraton Philadelphia City Ctr			Date of Disbursement
Mailing Address 17th & Race Street			$\begin{bmatrix} \begin{smallmatrix} M \\ 1 \end{smallmatrix} 2^{\begin{smallmatrix} M \\ \end{smallmatrix} } \hspace{0.5cm} / \hspace{0.5cm} \begin{bmatrix} \begin{smallmatrix} D \\ 2 \end{smallmatrix} 1 \\ \end{bmatrix} \hspace{0.5cm} / \hspace{0.5cm} \begin{bmatrix} \begin{smallmatrix} Y \\ 2 \end{smallmatrix} 0 \hspace{0.1cm} 1 \hspace{0.1cm} 0 \\ \end{bmatrix}$
,	State Zip Code PA 19103		Amount of Each Disbursement this Period
Purpose of Disbursement Lodging & Catering			4268.00
Candidate Name		Category/ Type	[MEMO ITEM]
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		Memo Entry
State: District: Full Name (Last, First, Middle Initial)			
Sheraton Suites Wilmington			Transaction ID: SB21B-2508-170000 Date of Disbursement
Mailing Address 422 Delaware Ave			$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 1 & 2 & M \end{smallmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	State Zip Code DE 19801		Amount of Each Disbursement this Period
Purpose of Disbursement Lodging & Catering			109.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	Primary General	Турс	[MEMO ITEM] Memo Entry
State: District:	Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional) .			0.00

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

	CHEDULE B (FEC Form 3X)		arate schedule(s)				E NUMBE	IUMBER: PAGE 256 / one)						/ 260
ITEMIZED DISBURSEMENTS			for each category of the Detailed Summary Page				22 28a	$\square$	23 28b	$\Box$	24 28c	Н	25 29	26
	y Information copied from such Reports and States for commercial purposes, other than using the nam													s
$\rangle$	NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE	- TRAVEL	OFFSET ACC	OUI	NT									
	Full Name (Last, First, Middle Initial) Liberty Hotel							of Di	sburs	_				80000
	Mailing Address 215 Charles St						12		_ 2	2 1		2	0 1 (	0
	City Boston	State MA	Zip Code 02114				Amo	ınt o	Each	n Dist	ourse	men	t this I	Period
	Purpose of Disbursement Lodging & Catering			Γ	0		] L.					137	99.68	3
	Candidate Name				ateg Typ	-				_				
	Senate President	ement For: Primary Other (sp	General ecify) ▼				Mem			]				
_	State: District: Full Name (Last, First, Middle Initial)						Trans	sacti	on ID	· s	R21F	3-25	508-1	90000
	Travel Agency Service						Date		sburs	_				
	Mailing Address 3415 E Kiehl Ave						1 <sup>M</sup> 2	IVI	2	21		2	0 1 (	כ '
	City Little Rock	State AR	Zip Code 72205				Amo	ınt o	Each	n Dist	ourse	men	t this I	Period
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	Candidate Name				ateg Typ	-				_				
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NAME OF COMMITTEE (In Full)			
DEMOCRATIC NATIONAL COMMITTEE -	TRAVEL OFFSET ACCO	TNUC	
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# **SCHEDULE B (FEC Form 3X)**

FOR LINE NUMBER: PAGE 259 / 260 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b 22 23 24 25 26 Detailed Summary Page 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT Full Name (Last, First, Middle Initial) Transaction ID: SB21B-2393 DEPARTMENT OF TREASURY Date of Disbursement 2 2 **1** 2 2010 Mailing Address P.O. BOX 27800 Citv State Zip Code Amount of Each Disbursement this Period WASHINGTON DC 20038-7800 1619.77 Purpose of Disbursement Airfare Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-2394 DEPARTMENT OF TREASURY Date of Disbursement 2 2 2010 Mailing Address P.O. BOX 27800 City State Zip Code Amount of Each Disbursement this Period WASHINGTON 20038-7800 DC 182.00 Purpose of Disbursement Travel & Subsistence Expense Reimb Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB21B-2395 DEPARTMENT OF TREASURY Date of Disbursement 2 2 2010 Mailing Address P.O. BOX 27800 City State Zip Code Amount of Each Disbursement this Period WASHINGTON DC 20038-7800 1126.89 Purpose of Disbursement Airfare Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District:

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

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