

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 430 South Capitol Street, SE  
2nd Floor  
 Check if different than previously reported. (ACC)  
Washington DC 20003

2. **FEC IDENTIFICATION NUMBER** C00000935  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 04 01 2009 through 04 30 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Jonathan S. Vogel

Signature of Treasurer Electronically Filed by Jonathan S. Vogel Date 08 03 2009

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

Office Use Only									
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Democratic Congressional Campaign Committee

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		491852.26
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	3347147.44									
(c) Total Receipts (from Line 19) .....	3053448.16	20255997.21								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	6400595.60	20747849.47								
7. Total Disbursements (from Line 31) .....	2374034.88	16721288.75								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	4026560.72	4026560.72								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	7333333.33									

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**

Write or Type Committee Name  
Democratic Congressional Campaign Committee

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	1196020.48	7328764.02
(ii) Unitemized .....	963274.00	4331683.43
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	2159294.48	11660447.45
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	184000.00	2723271.71
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	2343294.48	14383719.16
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	34536.06	132553.60
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	675617.62	5739724.45
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	3053448.16	20255997.21
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	3053448.16	20255997.21

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	4227.77
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	1682931.72	10560072.58
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1682931.72	10564300.35
22. Transfers to Affiliated/Other Party Committees.....	4520.00	23690.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8497.28	14703.01
24. Independent Expenditure (use Schedule E) .....	0.00	1847251.20
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	3979.21	86717.52
26. Loan Repayments Made.....	666666.67	4166666.67
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	7440.00	17960.00
(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)) .....	7440.00	17960.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	2374034.88	16721288.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2374034.88	16721288.75

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	2343294.48	14383719.16
34. Total Contribution Refunds (from Line 28(d)) .....	7440.00	17960.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2335854.48	14365759.16
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1682931.72	10564300.35
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	34536.06	132553.60
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1648395.66	10431746.75

**SCHEDULE C (FEC Form 3X)**

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

FOR LINE 13 OF FORM 3X

**LOANS**

NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**Transaction ID: SC-6954**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Bank of America, NA	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 730 15th Street, NW	
City Washington State DC ZIP Code 20005	

Original Amount of Loan 20000000.00	Cumulative Payment To Date 12666666.67	Balance Outstanding at Close of This Period 7333333.33
--	---	---

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:																
<table style="font-size: small;"> <tr><td>M</td><td>M</td></tr> <tr><td>0</td><td>9</td></tr> </table>	M	M	0	9	<table style="font-size: small;"> <tr><td>D</td><td>D</td></tr> <tr><td>0</td><td>8</td></tr> </table>	D	D	0	8	<table style="font-size: small;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table>	Y	Y	Y	Y	2	0	0	8	03/31/2010
M	M																		
0	9																		
D	D																		
0	8																		
Y	Y	Y	Y																
2	0	0	8																
		BBA LIBOR + 3 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional) .....	<input style="width: 100%;" type="text" value="7333333.33"/>
<b>TOTALS</b> This Period (last page in this line only) .....	<input style="width: 100%;" type="text" value="7333333.33"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

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

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

FOR LINE NUMBER: PAGE 7 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Joanne A. Abey

Mailing Address 1763 Buena Vista Ave  
Unit 302

City State Zip Code  
Livermore CA 94550-8910

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

Name of Employer Self-Employed Occupation  
Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
MM / DD / YYYY  
04 / 29 / 2009

**Transaction ID:** C6063680

Amount of Each Receipt this Period  
105.00

**B.** Full Name (Last, First, Middle Initial)  
S. Daniel Abraham

Mailing Address 150 Bradley Pl

City State Zip Code  
Palm Beach FL 33480-3686

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

Name of Employer Energy Foods of America LLC Occupation  
Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 23000.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6056436

Amount of Each Receipt this Period  
23000.00

**C.** Full Name (Last, First, Middle Initial)  
Todd Adair

Mailing Address 2242 Carmelita Dr

City State Zip Code  
San Carlos CA 94070

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

Name of Employer BKF Engineers Occupation  
Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
04 / 20 / 2009

**Transaction ID:** C6007457

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 23355.00

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

A. Form/Schedule : **SA**

Transaction ID :

Schedule A supporting Line 17 discloses payment(s) from American List Counsel, Inc. and from individuals for goods and/or services, including equipment, supplies, personnel & advertising services. These payments reflect the usual and normal charge for the lists, which have an ascertainable value. The amounts of the payments were determined by looking to the amounts paid for similar lists under normal commercial practices or by looking at the fair market value of similar goods and/or services.

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Danny Adams

Mailing Address 11510 Foxclove Rd

City State Zip Code  
Oakton VA 22124-1151

FEC ID number of contributing federal political committee. C

Name of Employer Kelley Doye & Warren Llp Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 1 4 / 2 0 0 9

**Transaction ID:** C6070455

Amount of Each Receipt this Period 450.00

**B.**

Full Name (Last, First, Middle Initial)  
Mariette Pathy Allen

Mailing Address 100 Riverside Drive  
Apt 15 A/B

City State Zip Code  
New York NY 10024

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation Artist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 1 3 / 2 0 0 9

**Transaction ID:** C6058367

Amount of Each Receipt this Period 750.00

**C.**

Full Name (Last, First, Middle Initial)  
Susan W. Almy

Mailing Address 266 Poverty Ln

City State Zip Code  
Lebanon NH 03766-2729

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6056509

Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... 2200.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Cesar L. Alvarez

Mailing Address 1221 Brickell Ave  
Suite 900

City Miami State FL Zip Code 33131-3224

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

Name of Employer Greenberg Traurig Occupation Attorney and CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6056354

Amount of Each Receipt this Period  
5000.00

**B.**

Full Name (Last, First, Middle Initial)  
Karen C. Amlong

Mailing Address 1343 Ponce De Leon Dr

City Fort Lauderdale State FL Zip Code 33316-1364

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

Name of Employer Amlong and Amlong Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2009

**Transaction ID:** C6082274

Amount of Each Receipt this Period  
350.00

**C.**

Full Name (Last, First, Middle Initial)  
Ann Anderson

Mailing Address 5040 Northside Dr NW

City Atlanta State GA Zip Code 30327-4422

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
04 / 06 / 2009

**Transaction ID:** C6069647

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5400.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Leon H. Anderson

Mailing Address 12320 Millstream Dr

City State Zip Code  
Bowie MD 20715-1547

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 9 / 2 0 0 9

Transaction ID: C6083466

Amount of Each Receipt this Period  
110.00

**B.**

Full Name (Last, First, Middle Initial)  
Amber Anderson-Mostyn

Mailing Address 200 Westcott St

City State Zip Code  
Houston TX 77007-7004

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

Name of Employer Mostyn Law Firm Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6056525

Amount of Each Receipt this Period  
30400.00

**C.**

Full Name (Last, First, Middle Initial)  
Donald C. Arbitblit

Mailing Address 988 Creston Rd

City State Zip Code  
Berkeley CA 94708-1544

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

Name of Employer Lief, Cabraser, Heimann & Bernstein Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6056399

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **35510.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Madeleine Arison

Mailing Address 9999 Collins Ave  
Apt 15-GJ

City State Zip Code  
Bal Harbour FL 33154

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

Name of Employer N/A Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 2 / 2 0 0 9

Transaction ID: C6056374

Amount of Each Receipt this Period  
1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Kurt Arnold

Mailing Address 1401 McKinney St  
Ste 2550

City State Zip Code  
Houston TX 77010-4048

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

Name of Employer Arnold and Itkin LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6056513

Amount of Each Receipt this Period  
5000.00

**C.**

Full Name (Last, First, Middle Initial)  
Ann Arretteig

Mailing Address PO Box 314

City State Zip Code  
Mandeville LA 70470-0314

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

Name of Employer Rosenblum Mental Health Ctr Occupation Psychiatrist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
425.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 7 / 2 0 0 9

Transaction ID: C6059500

Amount of Each Receipt this Period  
225.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6225.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)

Ann Arretteig

Mailing Address PO Box 314

City State Zip Code  
Mandeville LA 70470-0314

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

Name of Employer Occupation  
Rosenblum Mental Health Ctr Psychiatrist

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 425.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6057283

Amount of Each Receipt this Period  
200.00

**B.**

Full Name (Last, First, Middle Initial)

Melvin Backman

Mailing Address 11 Northfield Rd

City State Zip Code  
Glen Cove NY 11542-1717

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

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6059530

Amount of Each Receipt this Period  
150.00

**C.**

Full Name (Last, First, Middle Initial)

Kenneth Bacon

Mailing Address 1715 Hoban Road NW

City State Zip Code  
Washington DC 20007

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

Name of Employer Occupation  
Refugees International Executive

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6084652

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Cedric Bainton

Mailing Address 50 Ventura Ave

City	State	Zip Code
San Francisco	CA	94116

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

Name of Employer N/A	Occupation Retired
-------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 7 / 2 0 0 9

Transaction ID: C6089673

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
David Baker

Mailing Address 1197 Roesville Rd

City	State	Zip Code
Felton	DE	19943-4455

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

Name of Employer Kent Co Levy Court	Occupation Wastewater Operator
--	-----------------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6059260

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
Edward D. Bantel

Mailing Address 8145 E. Glenrosa Ave

City	State	Zip Code
Scottsdale	AZ	85251

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

Name of Employer Southwest Risk Services	Occupation Program Administrator
---	-------------------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 304.40
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 9

Transaction ID: C6079075

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

650.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 551						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Joshua Bar-Lev		Date of Receipt MM / DD / YYYY 04 / 24 / 2009		
	Mailing Address 84 Gypsy Lane		<b>Transaction ID:</b> C6056380		
	City Berkeley	State CA	Zip Code 94705	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Bright Source Energy	Occupation VP, Regulatory Affairs			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Richard C. Barron		Date of Receipt MM / DD / YYYY 04 / 22 / 2009		
	Mailing Address 225 Tampico Glen		<b>Transaction ID:</b> C6088912		
	City Escondido	State CA	Zip Code 92025	Amount of Each Receipt this Period 150.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Allen Barron Inc	Occupation Consultant			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Dewey L. L. Barton		Date of Receipt MM / DD / YYYY 04 / 19 / 2009		
	Mailing Address 125 Sterling Oak Ln		<b>Transaction ID:</b> C6070488		
	City Mooresville	State NC	Zip Code 28117-6696	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer N/A	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 16 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Herbert Beebe

Mailing Address PO Box 3458

City State Zip Code  
Las Cruces NM 88003-3458

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 04 / 28 / 2009  
Transaction ID: C6057519  
Amount of Each Receipt this Period: 400.00

**B.** Full Name (Last, First, Middle Initial)  
Sanra J. Belkind

Mailing Address 18151 NE 31 Court  
817

City State Zip Code  
Aventura FL 33160

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

Name of Employer N/A Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 04 / 22 / 2009  
Transaction ID: C6088734  
Amount of Each Receipt this Period: 250.00

**C.** Full Name (Last, First, Middle Initial)  
Michael R. Bell

Mailing Address 12 E Rowan Ave  
Ste 2

City State Zip Code  
Spokane WA 99207-1281

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

Name of Employer Self-Employed Occupation CPA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 04 / 20 / 2009  
Transaction ID: C6088547  
Amount of Each Receipt this Period: 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 900.00

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

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

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

FOR LINE NUMBER: PAGE 17 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Ian Benham

Mailing Address 184 W Poplar Ave

City State Zip Code  
San Mateo CA 94402-1152

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

Name of Employer Occupation  
Kaiser Permanente Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
04 / 10 / 2009

**Transaction ID:** C6082066

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Cecilia Benner

Mailing Address 121 Elm Park Ave

City State Zip Code  
Pleasant Rdg MI 48069-1044

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
MM / DD / YYYY  
04 / 15 / 2009

**Transaction ID:** C6082942

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Charles E. Bennett

Mailing Address 7411 Goshen Ct

City State Zip Code  
Manassas VA 20112

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
04 / 07 / 2009

**Transaction ID:** C6061091

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **250.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Charles E. Bennett

Mailing Address 7411 Goshen Ct

City State Zip Code  
Manassas VA 20112

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	9

Transaction ID: C6061090

Amount of Each Receipt this Period  
85.00

**B.**

Full Name (Last, First, Middle Initial)  
John Bennett

Mailing Address 137 Seabreeze Ave

City State Zip Code  
Delray Beach FL 33483-7017

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

Name of Employer Occupation  
Mantime Protection Security Inc. Mantime Security

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	0	9

Transaction ID: C6065597

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
Toby Berger

Mailing Address 810 Gilliams Mountain Rd.

City State Zip Code  
Charlottesvle VA 22903

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

Name of Employer Occupation  
UVA Charlottesville Professor

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 202.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	0	9

Transaction ID: C6075519

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

235.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 551  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Georgianna M. Bergeron

Mailing Address PO Box 333

City Onyx State CA Zip Code 93255-0333

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

Date of Receipt: 04 / 28 / 2009  
Transaction ID: C6083176  
Amount of Each Receipt this Period: 100.00

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date: 211.00

**B.** Full Name (Last, First, Middle Initial)  
Fred M.. M. Bering

Mailing Address 3366 Meadow Rdg

City Redding State CT Zip Code 06896-3229

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

Date of Receipt: 04 / 30 / 2009  
Transaction ID: C6058122  
Amount of Each Receipt this Period: 1000.00

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date: 2000.00

**C.** Full Name (Last, First, Middle Initial)  
Michael S. Berman

Mailing Address 2801 New Mexico Ave NW Apt 817

City Washington State DC Zip Code 20007-3910

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

Date of Receipt: 04 / 27 / 2009  
Transaction ID: C6056393  
Amount of Each Receipt this Period: 5000.00

Name of Employer Duberstein Group, Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date: 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6100.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Emilie W Betts

Mailing Address 23 Valley Rd

City State Zip Code  
Norwalk CT 06854-5011

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 0 9

**Transaction ID:** C6064395

Amount of Each Receipt this Period 50.00

**B.**

Full Name (Last, First, Middle Initial)  
Mark Bezrodny

Mailing Address 465 14th Ave  
Apt 9

City State Zip Code  
San Francisco CA 94118-2802

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 0 7 / 2 0 0 9

**Transaction ID:** C6082772

Amount of Each Receipt this Period 40.00

**C.**

Full Name (Last, First, Middle Initial)  
Mark Bezrodny

Mailing Address 465 14th Ave  
Apt 9

City State Zip Code  
San Francisco CA 94118-2802

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6077681

Amount of Each Receipt this Period 35.00

**SUBTOTAL** of Receipts This Page (optional) ..... 125.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Jean-Paul Bierny

Mailing Address 15 E Calle Conquista

City State Zip Code  
Tucson AZ 85716-4908

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

Name of Employer Radiology Ltd Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
04 / 20 / 2009

**Transaction ID:** C6070416

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
Jean-Paul Bierny

Mailing Address 15 E Calle Conquista

City State Zip Code  
Tucson AZ 85716-4908

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

Name of Employer Radiology Ltd Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
04 / 27 / 2009

**Transaction ID:** C6088790

Amount of Each Receipt this Period  
50.00

**C.**

Full Name (Last, First, Middle Initial)  
Lee Bird

Mailing Address PO Box 56

City State Zip Code  
Washington VA 22747-0056

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6062032

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **200.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Mary I. Bird

Mailing Address 302 N 4th Ave

City State Zip Code  
Abbotsford WI 54405-9727

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

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 285.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 2 / 2 0 0 9

Transaction ID: C6088771

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
Mary I. Bird

Mailing Address 302 N 4th Ave

City State Zip Code  
Abbotsford WI 54405-9727

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

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 285.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 7 / 2 0 0 9

Transaction ID: C6088772

Amount of Each Receipt this Period  
50.00

**C.**

Full Name (Last, First, Middle Initial)  
Budd Harris Bishop

Mailing Address PO Box 258

City State Zip Code  
Livingston TN 38570-0258

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

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 3 / 2 0 0 9

Transaction ID: C6058580

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

200.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 551
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Sydelle Blatt		Date of Receipt
	Mailing Address 734 Yokum Pond Rd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 30 / 2009
	City	State	Zip Code
	Becket	MA	01223-9752
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: C6080942
Name of Employer Information Requested		Occupation Information Requested	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Lisa A. Blue-Baron		Date of Receipt
	Mailing Address 5950 Deloache Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 30 / 2009
	City	State	Zip Code
	Dallas	TX	75225-3005
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: C6056491
Name of Employer Baron and Blue		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 25000.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Amy M. Blumenthal		Date of Receipt
	Mailing Address 3500 Oak Lawn Ave Ste 400		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 30 / 2009
	City	State	Zip Code
	Dallas	TX	75219-4343
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: C6056458
Name of Employer Self-Employed		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 26500.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 24 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Barbara Blywise  
 Mailing Address 31849 48th Circle SW  
 City State Zip Code  
 Federal Way WA 98023  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 0 5 / 2 0 0 9  
**Transaction ID:** C6090136  
 Amount of Each Receipt this Period  
 20.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self-Employed Mental Health Counselor  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 580.00

**B.** Full Name (Last, First, Middle Initial)  
Alma Bonar  
 Mailing Address 253 E 3rd St  
 City State Zip Code  
 El Paso IL 61738  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 1 4 / 2 0 0 9  
**Transaction ID:** C6084314  
 Amount of Each Receipt this Period  
 300.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Information Requested Information Requested  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 350.00

**C.** Full Name (Last, First, Middle Initial)  
Alma Bonar  
 Mailing Address 253 E 3rd St  
 City State Zip Code  
 El Paso IL 61738  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 1 7 / 2 0 0 9  
**Transaction ID:** C6084313  
 Amount of Each Receipt this Period  
 50.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Information Requested Information Requested  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 350.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 370.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)

Alpha Bond

Mailing Address 2319 Clayton St

City State Zip Code  
Macon GA 31204

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 0 / 2 0 0 9

Transaction ID: C6075811

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Curtis C. Bondurant

Mailing Address 9551 NE New Brooklyn Rd

City State Zip Code  
Bainbridge Island WA 98110-3618

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 249.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6083545

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Angie Bosetti

Mailing Address P.O. Box 437

City State Zip Code  
Sparta NJ 07871

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 4 / 2 0 0 9

Transaction ID: C6085001

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

500.00

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

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

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

FOR LINE NUMBER: PAGE 26 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Colin I. Bowrey

Mailing Address 14569 167th St

City State Zip Code  
Jamaica NY 11434

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 282.90

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2009

**Transaction ID:** C6084856

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Montie Box

Mailing Address PO Box 98  
1025 N. Woodland Pl

City State Zip Code  
Sand Springs OK 74063

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

Name of Employer Information Requested Occupation Information Requested  
Montie Box Real Estate Broker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
04 / 02 / 2009

**Transaction ID:** C6007335

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Bill Boyd

Mailing Address PO Box 1179

City State Zip Code  
McKinney TX 75070-8148

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

Name of Employer Information Requested Occupation Information Requested  
Boyd Veigel, PC Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6056468

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3250.00

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

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

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

FOR LINE NUMBER: PAGE 27 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Margie E. Boyles

Mailing Address 2426 N Terrace Ave

City State Zip Code  
Milwaukee WI 53211-4511

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 04 / 19 / 2009  
Transaction ID: C6070939  
Amount of Each Receipt this Period: 150.00

**B.** Full Name (Last, First, Middle Initial)  
Brad Brady

Mailing Address 1570 Shady Ct NW

City State Zip Code  
Swisher IA 52338-9456

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

Name of Employer Brady and O'Shea Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 04 / 30 / 2009  
Transaction ID: C6056507  
Amount of Each Receipt this Period: 5000.00

**C.** Full Name (Last, First, Middle Initial)  
Charles M. Brain

Mailing Address 6528 Ivy Hill Drive

City State Zip Code  
Mc Lean VA 22101-5204

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

Name of Employer Capitol Hill Strategies Occupation Legislative Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 04 / 22 / 2009  
Transaction ID: C6056364  
Amount of Each Receipt this Period: 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10150.00

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

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

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

FOR LINE NUMBER: PAGE 28 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Suzanne Bratcher

Mailing Address 147 Silver Springs Rd

City State Zip Code  
Bailey CO 80421

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

Name of Employer Self-Employed Occupation  
Self-Employed Writer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 3 / 2 0 0 9

**Transaction ID:** C6090195

Amount of Each Receipt this Period  
35.00

**B.** Full Name (Last, First, Middle Initial)  
David Bravender

Mailing Address PO Box 250

City State Zip Code  
Freeland WA 98249-0250

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

Name of Employer N/A Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 1 / 2 0 0 9

**Transaction ID:** C6090047

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
David Bravender

Mailing Address PO Box 250

City State Zip Code  
Freeland WA 98249-0250

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

Name of Employer N/A Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 3 / 2 0 0 9

**Transaction ID:** C6089315

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **110.00**

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

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

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

FOR LINE NUMBER: PAGE 29 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
David Bravender  
 Mailing Address PO Box 250  
 City Freeland State WA Zip Code 98249-0250  
 Date of Receipt 04 / 28 / 2009  
**Transaction ID: C6089316**  
 Amount of Each Receipt this Period 50.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer N/A Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 300.00

**B.** Full Name (Last, First, Middle Initial)  
David Bravender  
 Mailing Address PO Box 250  
 City Freeland State WA Zip Code 98249-0250  
 Date of Receipt 04 / 29 / 2009  
**Transaction ID: C6089317**  
 Amount of Each Receipt this Period 100.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer N/A Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 300.00

**C.** Full Name (Last, First, Middle Initial)  
Lisa Breslau  
 Mailing Address 1424 38th Street  
 City Sacramento State CA Zip Code 95816  
 Date of Receipt 04 / 30 / 2009  
**Transaction ID: C6056441**  
 Amount of Each Receipt this Period 5000.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer N/A Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5150.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 551  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Esther Breslow

Mailing Address 44 W 77th St  
# 9E

City State Zip Code  
New York NY 10024-5150

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

Name of Employer Occupation  
Wull Medical College Cornell Professor

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 0 / 2 0 0 9

Transaction ID: C6063101

Amount of Each Receipt this Period  
1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Curtis F. Brewer

Mailing Address 510 E 86th St  
Apt 17A

City State Zip Code  
New York NY 10028-7508

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

Name of Employer Occupation  
Albert Einstein College of Medicine Professor

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6074793

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
Tim Bridge

Mailing Address 60 Robinhood Dr

City State Zip Code  
San Francisco CA 94127

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 3 / 2 0 0 9

Transaction ID: C6084161

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1750.00**

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

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

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

FOR LINE NUMBER: PAGE 31 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Eleanor Briggs

Mailing Address 86 Kings Hwy

City Hancock State NH Zip Code 03449-5115

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

Name of Employer Self-Employed Occupation Photographer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 22 / 2009

Transaction ID: C6088944

Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
W. F. Brissenden

Mailing Address 1400 S Bates Ave

City Springfield State IL Zip Code 62704-3346

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 23 / 2009

Transaction ID: C6071239

Amount of Each Receipt this Period 250.00

**C.** Full Name (Last, First, Middle Initial)  
Nancy Britz

Mailing Address 154 Topsfield Rd  
11 Tall Pine Rd.

City Ipswich State MA Zip Code 01938-1678

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

Name of Employer Self-Employed Occupation Grower

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 21 / 2009

Transaction ID: C6068930

Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 450.00

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

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

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

FOR LINE NUMBER: PAGE 32 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Mary Broad

Mailing Address 2025 E. Lincoln St  
Apt. 1303

City Bloomington State IL Zip Code 61701

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 04 / 22 / 2009  
Transaction ID: C6090612  
Amount of Each Receipt this Period: 75.00

**B.** Full Name (Last, First, Middle Initial)  
Ernie P. Broussard

Mailing Address 318 Morris Ave,  
P.O. Box 360

City Estherwood State LA Zip Code 70534

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

Name of Employer Self-Employed Occupation Sabs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 04 / 29 / 2009  
Transaction ID: C6089109  
Amount of Each Receipt this Period: 250.00

**C.** Full Name (Last, First, Middle Initial)  
Larry Brown

Mailing Address P.O. Box 4451

City Honolulu State HI Zip Code 96812

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 04 / 30 / 2009  
Transaction ID: C6075806  
Amount of Each Receipt this Period: 160.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 485.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Melissa C. Brown

Mailing Address 2315 Capitol Ave

City Sacramento State CA Zip Code 95816-5812

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

Name of Employer Farrell Fraulob & Brown Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 30 / 2009

Transaction ID: C6056420

Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Phyllis J. Brown

Mailing Address 4285 Bannock Hwy

City Pocatello State ID Zip Code 83204-4523

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 19 / 2009

Transaction ID: C6088512

Amount of Each Receipt this Period 60.00

**C.** Full Name (Last, First, Middle Initial)  
Thomas W. Brown

Mailing Address 4241 N Sand Rd

City Hershey State NE Zip Code 69143-5322

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

Name of Employer Self-Employed Occupation Farmer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 20 / 2009

Transaction ID: C6070282

Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1310.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)

Anne M. Brownell

Mailing Address 122 Duke's County Ave.

City State Zip Code  
Oak Bluffs MA 02557

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

Name of Employer Occupation  
Self-Employed Mental Health Counselor

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1100.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6061581

Amount of Each Receipt this Period

400.00

**B.**

Full Name (Last, First, Middle Initial)

Preston Browning

Mailing Address PO Box 2006

City State Zip Code  
Ashfield MA 01330-2006

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

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 202.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 0 9

Transaction ID: C6082427

Amount of Each Receipt this Period

38.00

**C.**

Full Name (Last, First, Middle Initial)

Preston Browning

Mailing Address PO Box 2006

City State Zip Code  
Ashfield MA 01330-2006

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

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 202.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 1 / 2 0 0 9

Transaction ID: C6082428

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) ▶

488.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Donne Brownsey

Mailing Address 6406 Oakridge Way

City State Zip Code  
Sacramento CA 95831-2234

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

Name of Employer Occupation  
Sacramento Advocates Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6056428

Amount of Each Receipt this Period  
1000.00

**B.**

Full Name (Last, First, Middle Initial)  
David Bugatto

Mailing Address 4425 I Street

City State Zip Code  
Sacramento CA 95819

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

Name of Employer Occupation  
Alleghany Properties Investments

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 7 / 2 0 0 9

**Transaction ID:** C6056387

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Brooks R. Burdette

Mailing Address 919 3rd Ave.

City State Zip Code  
New York NY 10022

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 8 / 2 0 0 9

**Transaction ID:** C6080060

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4000.00**

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

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

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

FOR LINE NUMBER: PAGE 36 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Philip M. Burger

Mailing Address 26622 W Greentree Ct

City Olathe State KS Zip Code 66061-7319

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

Name of Employer Burger & Brown Engr Occupation Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 22 / 2009

**Transaction ID:** C6090063

Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
Ron Burkle

Mailing Address 9130 W Sunset Blvd

City Los Angeles State CA Zip Code 90069-3110

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

Name of Employer The Yucaipa Companies LLC Occupation Managing Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt 04 / 09 / 2009

**Transaction ID:** C6007350

Amount of Each Receipt this Period 30400.00

**C.** Full Name (Last, First, Middle Initial)  
Paul Burman

Mailing Address 5450 Whitley Park Ter Apt. 612

City Bethesda State MD Zip Code 20814-2056

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

Name of Employer Burman Properties Inc. Occupation Real Estate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 04 / 19 / 2009

**Transaction ID:** C6062490

Amount of Each Receipt this Period 55.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 30705.00

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

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

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

FOR LINE NUMBER: PAGE 37 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Lester Buster

Mailing Address 3350 Cherry Hills Ct  
Apt A303

City State Zip Code  
Fairfield CA 94534-7859

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6057770

Amount of Each Receipt this Period  
75.00

**B.** Full Name (Last, First, Middle Initial)  
Lester Buster

Mailing Address 3350 Cherry Hills Ct  
Apt A303

City State Zip Code  
Fairfield CA 94534-7859

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6057771

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Alice Butterworth

Mailing Address 907 W Milborn St

City State Zip Code  
Marion IN 46952-1354

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

Name of Employer Self-Employed Occupation Dentist

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 256.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 0 9

**Transaction ID:** C6069575

Amount of Each Receipt this Period  
64.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **189.00**

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

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

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

FOR LINE NUMBER: PAGE 38 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Miriam B. Butterworth

Mailing Address 81 Sunset Farm Rd

City State Zip Code  
West Hartford CT 06107-1332

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 311.00

Date of Receipt  
MM / DD / YYYY  
04 / 07 / 2009

**Transaction ID:** C6058927

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Constance Cabell

Mailing Address 10932 172nd St Uppr

City State Zip Code  
Jamaica NY 11433-3032

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
MM / DD / YYYY  
04 / 10 / 2009

**Transaction ID:** C6065238

Amount of Each Receipt this Period  
120.00

**C.** Full Name (Last, First, Middle Initial)  
Constance Cabell

Mailing Address 10932 172nd St Uppr

City State Zip Code  
Jamaica NY 11433-3032

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
MM / DD / YYYY  
04 / 10 / 2009

**Transaction ID:** C6065240

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 320.00

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

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

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

FOR LINE NUMBER: PAGE 39 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Constance Cabell

Mailing Address 10932 172nd St  
Uppr

City State Zip Code  
Jamaica NY 11433-3032

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

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 365.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	0	9

Transaction ID: C6065239

Amount of Each Receipt this Period

120.00
--------

**B.**

Full Name (Last, First, Middle Initial)  
Wiener Cadet

Mailing Address 8394 Cannonwood Ln.

City State Zip Code  
Jacksonville FL 32216

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

Name of Employer Occupation  
U.S Army Corps of Engineers Civil Engineer

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1050.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	0	9

Transaction ID: C6065950

Amount of Each Receipt this Period

500.00
--------

**C.**

Full Name (Last, First, Middle Initial)  
Edward A. Cage

Mailing Address 944 Yeoman St.

City State Zip Code  
Waukegan IL 60085

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

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	0	9

Transaction ID: C6057168

Amount of Each Receipt this Period

400.00
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**SUBTOTAL** of Receipts This Page (optional) .....

1020.00
---------

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

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# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)  
Doreen Cahoon

Mailing Address 2490 Fairmount Blvd.

City	State	Zip Code
Cleveland	OH	44106

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

Name of Employer N/A	Occupation Homemaker
-------------------------	-------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 8 / 2 0 0 9

Transaction ID: C6079476

Amount of Each Receipt this Period  
300.00

B.

Full Name (Last, First, Middle Initial)  
William Calhoun

Mailing Address 7204 Wellington Dr

City	State	Zip Code
Knoxville	TN	37919-5936

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

Name of Employer N/A	Occupation Retired
-------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 9

Transaction ID: C6077560

Amount of Each Receipt this Period  
150.00

C.

Full Name (Last, First, Middle Initial)  
William Calhoun

Mailing Address 7204 Wellington Dr

City	State	Zip Code
Knoxville	TN	37919-5936

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

Name of Employer N/A	Occupation Retired
-------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 4 / 2 0 0 9

Transaction ID: C6082638

Amount of Each Receipt this Period  
150.00

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

600.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
John W. Callender

Mailing Address 10833 Folsom Blvd., #240  
Rancho Cordova

City Rancho Cordova State CA Zip Code 95670

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
MM / DD / YYYY  
04 / 01 / 2009

**Transaction ID:** C6091337

Amount of Each Receipt this Period  
35.00

**B.**

Full Name (Last, First, Middle Initial)  
Leonard Cargan

Mailing Address 209 Whitehall Dr

City Yellow Spgs State OH Zip Code 45387-1936

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
04 / 13 / 2009

**Transaction ID:** C6068452

Amount of Each Receipt this Period  
300.00

**C.**

Full Name (Last, First, Middle Initial)  
Elsie R. Carr

Mailing Address 100 Thorndale Dr  
Apt 306

City San Rafael State CA Zip Code 94903-4569

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6062848

Amount of Each Receipt this Period  
510.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **845.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 551  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Dorothy E. Cecil

Mailing Address 500 E Marylyn Ave  
Apt F95

City State Zip Code  
State College PA 16801-6223

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
04 / 28 / 2009

**Transaction ID:** C6074747

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
Joanna L. Challacombe

Mailing Address 11 S Wille St  
Apt 502

City State Zip Code  
Mount Prospect IL 60056-3151

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

Name of Employer Self-Employed Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
04 / 22 / 2009

**Transaction ID:** C6089946

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
Paul Chapin

Mailing Address 829 Gonzales Rd

City State Zip Code  
Santa Fe NM 87501-8924

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
MM / DD / YYYY  
04 / 01 / 2009

**Transaction ID:** C6089077

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **170.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Paul Chapin

Mailing Address 829 Gonzales Rd

City State Zip Code  
Santa Fe NM 87501-8924

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 0 9

**Transaction ID:** C6089078

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Julie Anne Chase

Mailing Address 1546 32nd Street, NW

City State Zip Code  
Washington DC 20007

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

Name of Employer Chase Communications Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 0 / 2 0 0 9

**Transaction ID:** C6007453

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Hazem H Chehabi

Mailing Address 145 Irvine Cove Court

City State Zip Code  
Laguna Beach CA 92651

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

Name of Employer Newport Diagnostic Center Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6056444

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6100.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Kenneth Childs

Mailing Address 25 Bonner St

City State Zip Code  
Stamford CT 06902-6609

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

Name of Employer Information Requested Occupation  
Occupation Dentist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6064610

Amount of Each Receipt this Period  
300.00

**B.**

Full Name (Last, First, Middle Initial)  
Michael Chorchiel

Mailing Address 377 Smith St. # 6

City State Zip Code  
Perth Amboy NJ 08861

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

Name of Employer Occupation  
Century Distribution Corporation Ediso Warehouse Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 635.00

Date of Receipt  
MM / DD / YYYY  
04 / 19 / 2009

**Transaction ID:** C6078844

Amount of Each Receipt this Period  
25.00

**C.**

Full Name (Last, First, Middle Initial)  
Michael Chorchiel

Mailing Address 377 Smith St. # 6

City State Zip Code  
Perth Amboy NJ 08861

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

Name of Employer Occupation  
Century Distribution Corporation Ediso Warehouse Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 635.00

Date of Receipt  
MM / DD / YYYY  
04 / 23 / 2009

**Transaction ID:** C6078842

Amount of Each Receipt this Period  
15.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **340.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)

Michael Chorchiel

Mailing Address 377 Smith St. # 6

City State Zip Code  
Perth Amboy NJ 08861

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

Name of Employer Occupation  
Century Distribution Corp- Warehouse Worker  
oration Ediso

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 635.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 3 / 2 0 0 9

Transaction ID: C6078843

Amount of Each Receipt this Period  
15.00

**B.**

Full Name (Last, First, Middle Initial)

Myra Chow

Mailing Address 54 Shell Rd

City State Zip Code  
Mill Valley CA 94941-1550

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

Name of Employer Occupation  
Self-Employed Consultant

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 0 / 2 0 0 9

Transaction ID: C6007456

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)

Toni Christianson

Mailing Address 17544 Valentine Rd

City State Zip Code  
Mount Vernon WA 98273-7196

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

Name of Employer Occupation  
Christianson's Nursery Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 209.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 0 9

Transaction ID: C6057978

Amount of Each Receipt this Period  
209.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

724.00

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

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

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

FOR LINE NUMBER: PAGE 46 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Yon K. Chung

Mailing Address 8220 Topanga Canyon Blvd.

City State Zip Code  
Canoga Park CA 91304

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 7 / 2 0 0 9

**Transaction ID:** C6060605

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Deb Cirksena

Mailing Address 2025 Sewell St

City State Zip Code  
Lincoln NE 68502-3847

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

Name of Employer Self-Employed Occupation Financial Advisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 7 / 2 0 0 9

**Transaction ID:** C6063810

Amount of Each Receipt this Period  
400.00

**C.** Full Name (Last, First, Middle Initial)  
Stephen Cloobek

Mailing Address 3745 Las Vegas Blvd S

City State Zip Code  
Las Vegas NV 89109-4308

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

Name of Employer Diamond Resorts Occupation Chairman & CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 4 / 2 0 0 9

**Transaction ID:** C6007333

Amount of Each Receipt this Period  
30400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 30900.00

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

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

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

FOR LINE NUMBER: PAGE 47 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Arnold Cohen

Mailing Address 500 Bayview Dr  
Apt. 1120

City Sunny Isles Beach State FL Zip Code 33160-4710

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 04 / 14 / 2009  
**Transaction ID: C6007352**  
 Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Marsha Cohen

Mailing Address 2201 Lyon St

City San Francisco State CA Zip Code 94115-1008

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

Name of Employer University of California Occupation Professor

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 04 / 27 / 2009  
**Transaction ID: C6056385**  
 Amount of Each Receipt this Period: 2000.00

**C.** Full Name (Last, First, Middle Initial)  
Michele Colella

Mailing Address 2138 63rd St

City Brooklyn State NY Zip Code 11204-3058

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 04 / 30 / 2009  
**Transaction ID: C6059677**  
 Amount of Each Receipt this Period: 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3100.00

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

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

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

FOR LINE NUMBER: PAGE 48 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Joanne Coleman

Mailing Address PO Box 768

City Farmersville State TX Zip Code 75442-0768

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

Name of Employer First Bank Farmersville TX Occupation Real Estate Loan Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 04 / 10 / 2009  
Transaction ID: C6069983  
Amount of Each Receipt this Period: 230.00

**B.** Full Name (Last, First, Middle Initial)  
Joseph Colwell

Mailing Address 2030 Karren Ln

City Carlsbad State CA Zip Code 92008-2726

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 04 / 19 / 2009  
Transaction ID: C6062734  
Amount of Each Receipt this Period: 55.00

**C.** Full Name (Last, First, Middle Initial)  
Janet Conn

Mailing Address 5804 Oak Ln

City Edina State MN Zip Code 55436-2229

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

Name of Employer Target Corp Occupation Payroll System Administrator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 04 / 21 / 2009  
Transaction ID: C6061886  
Amount of Each Receipt this Period: 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 535.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Frances D. Cook

Mailing Address 767 NW 18th St

City State Zip Code  
Homestead FL 33030-4051

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 3 / 2 0 0 9

Transaction ID: C6069425

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Cynthia Cooper

Mailing Address 100 Fieldstone Ct

City State Zip Code  
Chapel Hill NC 27514-9556

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

Name of Employer N/A Occupation Disabled

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 1 / 2 0 0 9

Transaction ID: C6064788

Amount of Each Receipt this Period  
50.00

**C.**

Full Name (Last, First, Middle Initial)  
Thomas E. Cooper

Mailing Address PO Box 234  
P.O. Box 234

City State Zip Code  
Iuka MS 38852-0234

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 7 / 2 0 0 9

Transaction ID: C6062199

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

500.00

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

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

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

FOR LINE NUMBER: PAGE 50 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Edward A. Copley

Mailing Address 1700 Pacific Suite 4100

City Dallas State TX Zip Code 75201-4675

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

Name of Employer Akin Gump Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 04 / 30 / 2009  
Transaction ID: C6056470  
Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Charles S. Cox

Mailing Address 12926 Via Grimaldi

City Del Mar State CA Zip Code 92014-3726

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 04 / 22 / 2009  
Transaction ID: C6089995  
Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
Gregory F. Cox

Mailing Address 2665 Long Street

City Beaumont State TX Zip Code 77707-1214

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

Name of Employer Mostyn Law Firm Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 04 / 30 / 2009  
Transaction ID: C6056473  
Amount of Each Receipt this Period: 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6100.00

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

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

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

FOR LINE NUMBER: PAGE 51 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Ann W. Craig  
Mailing Address 260 Oak St  
City Oberlin State OH Zip Code 44074-1518  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 04 / 22 / 2009  
Transaction ID: C6088654  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
Vivian Cress  
Mailing Address 1985 Graeagle Ln  
City Lincoln State CA Zip Code 95648-8683  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 275.00  
Date of Receipt 04 / 18 / 2009  
Transaction ID: C6090056  
Amount of Each Receipt this Period 50.00

**C.** Full Name (Last, First, Middle Initial)  
Andrew S. Crichton  
Mailing Address PO Box 129  
City Bondville State VT Zip Code 05340-0129  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 04 / 17 / 2009  
Transaction ID: C6083082  
Amount of Each Receipt this Period 200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 350.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 52 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Ashle Crocker  
Mailing Address 6120 4th Ave  
City Sacramento State CA Zip Code 95817  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Remy, Thomas, Mouse, Manley Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 04 / 30 / 2009  
Transaction ID: C6056515  
Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Patricia Crocker  
Mailing Address 316 Singing Brook Cir.  
City Santa Rosa State CA Zip Code 95409  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 208.00  
Date of Receipt 04 / 10 / 2009  
Transaction ID: C6076880  
Amount of Each Receipt this Period 208.00

**C.** Full Name (Last, First, Middle Initial)  
Margareth Crosnier de Bellaistre  
Mailing Address 20-43 Seagirt Blvd #4!  
City Far Rockaway State NY Zip Code 11691  
FEC ID number of contributing federal political committee. **C**  
Name of Employer DFMS Occupation Finance  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 235.00  
Date of Receipt 04 / 01 / 2009  
Transaction ID: C6089446  
Amount of Each Receipt this Period 20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1228.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 53 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Margareth Crosnier de Bellaistre

Mailing Address 20-43 Seagirt Blvd #4!

City State Zip Code  
Far Rockaway NY 11691

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

Name of Employer DFMS Occupation Finance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt 04 / 15 / 2009  
Transaction ID: C6089447  
Amount of Each Receipt this Period 10.00

**B.** Full Name (Last, First, Middle Initial)  
Margareth Crosnier de Bellaistre

Mailing Address 20-43 Seagirt Blvd #4!

City State Zip Code  
Far Rockaway NY 11691

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

Name of Employer DFMS Occupation Finance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt 04 / 27 / 2009  
Transaction ID: C6089448  
Amount of Each Receipt this Period 35.00

**C.** Full Name (Last, First, Middle Initial)  
Areta Crowell

Mailing Address 2934 N Beachwood Dr

City State Zip Code  
Los Angeles CA 90068-1926

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 04 / 19 / 2009  
Transaction ID: C6067865  
Amount of Each Receipt this Period 15.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 60.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)

Ian M. Cumming

Mailing Address PO Box 4902

City State Zip Code  
Jackson WY 83001

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

Name of Employer Occupation  
Leucadia National Corpora- Chairman & CEO  
tion

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 23300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 7 / 2 0 0 9

Transaction ID: C6007448

Amount of Each Receipt this Period

23300.00

**B.**

Full Name (Last, First, Middle Initial)

James Cummings

Mailing Address 1180 Union St  
# 2

City State Zip Code  
San Francisco CA 94109-2019

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

Name of Employer Occupation  
Towers Perrin Principal

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 0 9

Transaction ID: C6090044

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Rosalie Cuneo Amer

Mailing Address 5524 Caleb Ave.

City State Zip Code  
Sacramento CA 95819

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

Name of Employer Occupation  
Los Rios CC District Professor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6056452

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

24400.00

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

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

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

FOR LINE NUMBER: PAGE 55 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Michael K. Curtis

Mailing Address 201 E Avondale Drive

City Greensboro State NC Zip Code 27403

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

Name of Employer WFU Occupation Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 04 / 19 / 2009

Transaction ID: C6088581

Amount of Each Receipt this Period 50.00

**B.** Full Name (Last, First, Middle Initial)  
Carol Joan Cutter

Mailing Address 910 S Sierra Vista Ave.

City Alhambra State CA Zip Code 91801

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

Name of Employer Self-Employed Occupation Educator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 21 / 2009

Transaction ID: C6073144

Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Carl James Dahn

Mailing Address 2704 George Ct

City Rolling Meadows State IL Zip Code 60008-1713

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 04 / 01 / 2009

Transaction ID: C6090686

Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 650.00

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

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

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

FOR LINE NUMBER: PAGE 56 / 551  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Carl James Dahn

Mailing Address 2704 George Ct

City State Zip Code  
Rolling Meadows IL 60008-1713

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 0 3 / 2 0 0 9

**Transaction ID:** C6090687

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Violette F. Dailey

Mailing Address 3621 N 68th St

City State Zip Code  
Scottsdale AZ 85251-5311

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6065634

Amount of Each Receipt this Period  
120.00

**C.** Full Name (Last, First, Middle Initial)  
Margaret J. Dalal

Mailing Address 1633 Webster St

City State Zip Code  
Palo Alto CA 94301-3852

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 1 4 / 2 0 0 9

**Transaction ID:** C6059600

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 720.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Muriel R. Danis

Mailing Address 12 Maynard St. Apt. 3

City Putnam State CT Zip Code 06260

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 04 / 07 / 2009

Transaction ID: C6084672

Amount of Each Receipt this Period: 50.00

**B.**

Full Name (Last, First, Middle Initial)  
Muriel R. Danis

Mailing Address 12 Maynard St. Apt. 3

City Putnam State CT Zip Code 06260

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 04 / 10 / 2009

Transaction ID: C6084671

Amount of Each Receipt this Period: 50.00

**C.**

Full Name (Last, First, Middle Initial)  
Elinore Darland

Mailing Address 3094 Hendricks Hill Dr

City Eugene State OR Zip Code 97403-3202

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 04 / 27 / 2009

Transaction ID: C6068959

Amount of Each Receipt this Period: 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 200.00

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

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

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

FOR LINE NUMBER: PAGE 58 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
C. Duane Dauner

Mailing Address 1215 K St  
Suite 800

City State Zip Code  
Sacramento CA 95814

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

Name of Employer California Hospital Association  
Occupation President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	9

**Transaction ID:** C6056414

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
Roberta Davidson

Mailing Address 532 N Central Ave.

City State Zip Code  
Prestonsburg KY 41653

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

Name of Employer Information Requested  
Occupation Information Requested

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
527.80

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	4	/	2	0	0	9

**Transaction ID:** C6060959

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Melinda Davis

Mailing Address 228 Laurel Ct

City State Zip Code  
Dawson GA 39842-4311

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

Name of Employer Information Requested  
Occupation Information Requested

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	9

**Transaction ID:** C6065610

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2550.00**

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

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

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

FOR LINE NUMBER: PAGE 59 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Willie Davis

Mailing Address 238 Glenwood Ave.

City State Zip Code  
East Orange NJ 07017

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
04 / 28 / 2009

**Transaction ID:** C6074291

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Lucille D. Deckman

Mailing Address 149 Wyndham Way  
Apt 116

City State Zip Code  
Petaluma CA 94954-3865

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
04 / 13 / 2009

**Transaction ID:** C6083353

Amount of Each Receipt this Period  
75.00

**C.** Full Name (Last, First, Middle Initial)  
Tadesse Degeta

Mailing Address 3118 S Granby Way

City State Zip Code  
Aurora CO 80014-3837

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

Name of Employer Barton Protective Service Occupation Official

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 246.00

Date of Receipt  
MM / DD / YYYY  
04 / 13 / 2009

**Transaction ID:** C6059289

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **275.00**

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

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

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

FOR LINE NUMBER: PAGE 60 / 551  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Frank Dellorso

Mailing Address 24 Greenwood Lane

City Valhalla State NY Zip Code 10595

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

Name of Employer Villa Construction Occupation Principal

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 17 / 2009

**Transaction ID:** C6007341

Amount of Each Receipt this Period 500.00

**B.** Full Name (Last, First, Middle Initial)  
Aaron J. DeLuca

Mailing Address 19414 Bremerton Lane

City Spring State TX Zip Code 77388

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

Name of Employer Self-Employed Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 30 / 2009

**Transaction ID:** C6056459

Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Dwain Dent

Mailing Address 1120 Penn St

City Fort Worth State TX Zip Code 76102-3417

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

Name of Employer Self-Employed Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 04 / 30 / 2009

**Transaction ID:** C6056502

Amount of Each Receipt this Period 2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3500.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 61 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
J K. Derden

Mailing Address 123 Barley Rd

City Arcata State CA Zip Code 95521

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

Name of Employer Humboldt State University Occupation Professor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 17 / 2009

Transaction ID: C6059214

Amount of Each Receipt this Period 250.00

**B.**

Full Name (Last, First, Middle Initial)  
R Neil Dickman

Mailing Address 2623 O St NW

City Washington State DC Zip Code 20007-3124

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 14 / 2009

Transaction ID: C6083057

Amount of Each Receipt this Period 100.00

**C.**

Full Name (Last, First, Middle Initial)  
Dennis W. Dickson

Mailing Address 13919 Shipwreck Cir N

City Jacksonville State FL Zip Code 32224-1121

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

Name of Employer Mayo Clinic Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt 04 / 30 / 2009

Transaction ID: C6077859

Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 450.00

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

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

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

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(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Sharon L. Dishman

Mailing Address 5331 Carmen Way

City State Zip Code  
Sacramento CA 95822

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

Name of Employer Self-Employed Occupation  
Caretaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6056434

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Abida Diwan

Mailing Address 6365 Collins Ave  
Apt 1602

City State Zip Code  
Miami Beach FL 33141

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

Name of Employer N/A Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
MM / DD / YYYY  
04 / 27 / 2009

**Transaction ID:** C6089194

Amount of Each Receipt this Period  
35.00

**C.** Full Name (Last, First, Middle Initial)  
Eileen C. Doherty

Mailing Address 3632 N Janssen Ave

City State Zip Code  
Chicago IL 60613

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

Name of Employer IBM Occupation  
Director, BT CIO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
04 / 27 / 2009

**Transaction ID:** C6089771

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1135.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Curt Dombek

Mailing Address 2641 Nichols Canyon Road

City	State	Zip Code
Los Angeles	CA	90046

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

Name of Employer Bryan Cave Law Offices	Occupation Attorney
--	------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 9500.00
---	-------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 9

Transaction ID: C6056352

Amount of Each Receipt this Period  
2375.00

**B.**

Full Name (Last, First, Middle Initial)  
Christopher J. Donatelli

Mailing Address 3031 Gates Rd NW

City	State	Zip Code
Washington	DC	20008-2118

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

Name of Employer Donatelli Development Inc.	Occupation President
--	-------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00
---	-------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6056432

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Bea Donis

Mailing Address 11714 Lake Aston Ct.  
Apt. 110

City	State	Zip Code
Tampa	FL	33626

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

Name of Employer N/A	Occupation Retired
-------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 7 / 2 0 0 9

Transaction ID: C6090132

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

3475.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 551
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Dan Dooley	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 927 Sierra Park Lane	<b>Transaction ID:</b> C6056416
	City State Zip Code Sacramento CA 95864	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation University of California Sr. Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Diana S. Dooley	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 927 Sierra Park Lane	<b>Transaction ID:</b> C6056417
	City State Zip Code Sacramento CA 95864	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation California Childrens Hospital President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Barbara E. Doran	Date of Receipt MM / DD / YYYY 04 / 19 / 2009
	Mailing Address 1107 Dale Dr	<b>Transaction ID:</b> C6064397
	City State Zip Code Silver Spring MD 20910-1607	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Executive Office Of The President Info Tech Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2060.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 65 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Erl Dordal

Mailing Address 505 N Lake Shore Dr  
Apt 290

City Chicago State IL Zip Code 60611-3427

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6056634

Amount of Each Receipt this Period 270.00

**B.** Full Name (Last, First, Middle Initial)  
Roderick Dorman

Mailing Address 4033 Chevy Chase Dr.

City La Canada Flintrid State CA Zip Code 91011

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY  
04 / 17 / 2009

**Transaction ID:** C6060547

Amount of Each Receipt this Period 300.00

**C.** Full Name (Last, First, Middle Initial)  
James M. Draper

Mailing Address 30979 Peninsula Dr.

City Orange Beach State AL Zip Code 36561

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Educator

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt MM / DD / YYYY  
04 / 01 / 2009

**Transaction ID:** C6090267

Amount of Each Receipt this Period 35.00

**SUBTOTAL** of Receipts This Page (optional) ..... 605.00

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

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 66 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Roger A. Dreyer

Mailing Address 7030 Grant Ave

City State Zip Code  
Carmichael CA 95608-2866

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

Name of Employer Occupation  
Dreyer Babich Buccola Cal- lahah & Wood Attorney

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	9

**Transaction ID:** C6056422

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Martin Dreyfuss

Mailing Address 131 Embarcadero W  
Apt 3107

City State Zip Code  
Oakland CA 94607-3765

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

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	8	/	2	0	0	9

**Transaction ID:** C6064765

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Philip L. Driscoll

Mailing Address 5526 Greening Ln.

City State Zip Code  
Madison WI 53705

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

Name of Employer Occupation  
Driscoll Ent Inc. Construction

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	9	/	2	0	0	9

**Transaction ID:** C6075729

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1350.00**

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

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

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

FOR LINE NUMBER: PAGE 67 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
June Ann Drygas  
Mailing Address 4515 Star Ranch Road  
City State Zip Code  
Colorado Springs CO 80906  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 220.00  
Date of Receipt: 04 / 07 / 2009  
Transaction ID: C6060913  
Amount of Each Receipt this Period 120.00

**B.** Full Name (Last, First, Middle Initial)  
William E. Dufford  
Mailing Address 101 S Edisto Ave  
City State Zip Code  
Columbia SC 29205-3301  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt: 04 / 16 / 2009  
Transaction ID: C6068545  
Amount of Each Receipt this Period 150.00

**C.** Full Name (Last, First, Middle Initial)  
Sandra Kay Dunn  
Mailing Address 3001 Marlynn St  
City State Zip Code  
Carmichael CA 95608-4529  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Somach, Simmons And Dunn Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt: 04 / 27 / 2009  
Transaction ID: C6056403  
Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1270.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 68 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Thomas Dunson

Mailing Address 7104 Karen Ln.

City State Zip Code  
Joshua TX 76058

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

Name of Employer Occupation  
N/A N/A

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 3 / 2 0 0 9

Transaction ID: C6060863

Amount of Each Receipt this Period  
200.00

**B.**

Full Name (Last, First, Middle Initial)  
Robert R. Dyson

Mailing Address 3625 Route 82

City State Zip Code  
Millbrook NY 12545-6041

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

Name of Employer Occupation  
Dyson, Kissner, Moran Corp. Chairman & CEO

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 9 / 2 0 0 9

Transaction ID: C6007429

Amount of Each Receipt this Period  
5000.00

**C.**

Full Name (Last, First, Middle Initial)  
William C. Eakin

Mailing Address 706 Highland Ave NE

City State Zip Code  
Atlanta GA 30312-1426

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

Name of Employer Occupation  
Self-Employed Business Manager

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 7 / 2 0 0 9

Transaction ID: C6077162

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

5300.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 69 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial) William Eddison		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
Mailing Address 13801 York Rd Apt D5		<b>Transaction ID:</b> C6062872
City Cockeysville	State MD	Zip Code 21030-1835
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**B.**

Full Name (Last, First, Middle Initial) Andrew Egan		Date of Receipt MM / DD / YYYY 04 / 22 / 2009
Mailing Address Box 91892133		<b>Transaction ID:</b> C6090395
City Sioux Falls	State SD	Zip Code 57186
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer University of Michigan	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

**C.**

Full Name (Last, First, Middle Initial) Joanne H. Egerman		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
Mailing Address 77 Westcliff Rd		<b>Transaction ID:</b> C6056527
City Weston	State MA	Zip Code 02493-1409
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1900.00
Name of Employer N/A	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 30400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 70 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Paul Egerman

Mailing Address 77 Westcliff Rd

City State Zip Code  
Weston MA 02493-1409

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

Name of Employer Occupation  
eScription, Inc. Chairman & Chief Executive Officer

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 30400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6056526

Amount of Each Receipt this Period  
1900.00

**B.**

Full Name (Last, First, Middle Initial)  
Anne H. Ehrlich

Mailing Address 936 Valdez Pl

City State Zip Code  
Stanford CA 94305-1076

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

Name of Employer Occupation  
Stanford University Sr Research Scientist

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 7 / 2 0 0 9

Transaction ID: C6077974

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
Anne H. Ehrlich

Mailing Address 936 Valdez Pl

City State Zip Code  
Stanford CA 94305-1076

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

Name of Employer Occupation  
Stanford University Sr Research Scientist

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6074066

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) .....

2100.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 71 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
E. Bartlett Ekren

Mailing Address 4260 US Highway 12 E

City State Zip Code  
White Sulphur Spri MT 59645-9630

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 1 7 / 2 0 0 9

**Transaction ID:** C6071071

Amount of Each Receipt this Period 160.00

**B.**

Full Name (Last, First, Middle Initial)  
E. Bartlett Ekren

Mailing Address 4260 US Highway 12 E

City State Zip Code  
White Sulphur Spri MT 59645-9630

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6065024

Amount of Each Receipt this Period 160.00

**C.**

Full Name (Last, First, Middle Initial)  
Carol H. Ellis

Mailing Address 1103 Lore Ave.

City State Zip Code  
Wilmington DE 00001-9809

FEC ID number of contributing federal political committee. C

Name of Employer State of Delaware Occupation Division Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 0 8 / 2 0 0 9

**Transaction ID:** C6085549

Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... 820.00

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

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

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

FOR LINE NUMBER: PAGE 72 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Mary R. Ely  
Mailing Address 5441 E 131st Ave.  
City Anchorage State AK Zip Code 99516  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Anchorage School District Occupation Teacher  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 275.00  
Date of Receipt 04 / 28 / 2009  
Transaction ID: C6084412  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
Jerry Enomoto  
Mailing Address 310 Vista Cove Cir  
City Sacramento State CA Zip Code 95835-2003  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 04 / 14 / 2009  
Transaction ID: C6007437  
Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
Jerry Enomoto  
Mailing Address 310 Vista Cove Cir  
City Sacramento State CA Zip Code 95835-2003  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 04 / 30 / 2009  
Transaction ID: C6063788  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 300.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 73 / 551  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Colleen Fain

Mailing Address 700 Arvida Pkwy

City Miami State FL Zip Code 33156-2325

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

Name of Employer N/A Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 04 / 22 / 2009  
Transaction ID: C6056375  
Amount of Each Receipt this Period: 1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Daryl R. Fair

Mailing Address 2 Highland Dr

City Yardley State PA Zip Code 19067-2702

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

Name of Employer The College Of New Jersey Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 04 / 09 / 2009  
Transaction ID: C6058946  
Amount of Each Receipt this Period: 50.00

**C.**

Full Name (Last, First, Middle Initial)  
Debbie Falic

Mailing Address 6100 Hollywood Blvd

City Hollywood State FL Zip Code 33024-7900

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

Name of Employer N/A Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 04 / 30 / 2009  
Transaction ID: C6056481  
Amount of Each Receipt this Period: 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6050.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 74 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Fima Falic

Mailing Address 9999 Collins Ave  
Apt 3A

City State Zip Code  
Bal Harbour FL 33154-1832

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 30 / 2009

**Transaction ID:** C6056521

Amount of Each Receipt this Period  
5000.00

**B.**

Full Name (Last, First, Middle Initial)  
Jerome Falic

Mailing Address 6100 Hollywood Blvd

City State Zip Code  
Hollywood FL 33024-7900

FEC ID number of contributing federal political committee. C

Name of Employer World Duty Free Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 30 / 2009

**Transaction ID:** C6056482

Amount of Each Receipt this Period  
5000.00

**C.**

Full Name (Last, First, Middle Initial)  
Leon S. Falic

Mailing Address 145 Biscay Dr

City State Zip Code  
Bal Harbour FL 33154-1322

FEC ID number of contributing federal political committee. C

Name of Employer Duty Free America Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 30 / 2009

**Transaction ID:** C6056514

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... 15000.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 75 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Nily Falic

Mailing Address 9999 Collins Avenue  
Apt. 3A

City State Zip Code  
Bal Harbour FL 33154

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

Name of Employer N/A Occupation Homemaker

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	9

**Transaction ID:** C6056516

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Simon Falic

Mailing Address 150 Harbour Way

City State Zip Code  
Bal Harbour FL 33154-1333

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

Name of Employer Duty-Free America Occupation Chairman

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
7925.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	0	/	2	0	0	9

**Transaction ID:** C6056492

Amount of Each Receipt this Period  
2925.00

\* In-Kind: payment for event over \$4000 allotted for house parties

**C.** Full Name (Last, First, Middle Initial)  
Simon Falic

Mailing Address 150 Harbour Way

City State Zip Code  
Bal Harbour FL 33154-1333

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

Name of Employer Duty-Free America Occupation Chairman

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
7925.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	9

**Transaction ID:** C6056496

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **12925.00**

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

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

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

FOR LINE NUMBER: PAGE 76 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Terrence E. Fancher

Mailing Address 660 W. Santa Inez Ave.

City Hillsborough State CA Zip Code 94010

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

Name of Employer Stockbridge Capital Group, LLC Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt: 04 / 27 / 2009  
Transaction ID: C6056386  
Amount of Each Receipt this Period: 30400.00

**B.** Full Name (Last, First, Middle Initial)  
Emmanuel Farber

Mailing Address 3600 Chateau Dr Apt 105

City Columbia State SC Zip Code 29204-3919

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 04 / 20 / 2009  
Transaction ID: C6063394  
Amount of Each Receipt this Period: 270.00

**C.** Full Name (Last, First, Middle Initial)  
Eloise K Farrell

Mailing Address 26012 Oakbay Rd

City Torrance State CA Zip Code 90505-7228

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt: 04 / 13 / 2009  
Transaction ID: C6083227  
Amount of Each Receipt this Period: 35.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 30705.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 77 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
John Farritor

Mailing Address 312 Horizon Ln

City State Zip Code  
Oceanside CA 92056-4808

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

Name of Employer Self-Employed Occupation Author

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
04 / 29 / 2009

**Transaction ID:** C6091271

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Sarah Faulkner

Mailing Address 108 Sumach St

City State Zip Code  
Lookout Mtn. TN 37350

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

Name of Employer N/A Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
MM / DD / YYYY  
04 / 01 / 2009

**Transaction ID:** C6090426

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Sarah Faulkner

Mailing Address 108 Sumach St

City State Zip Code  
Lookout Mtn. TN 37350

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

Name of Employer N/A Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
MM / DD / YYYY  
04 / 24 / 2009

**Transaction ID:** C6090427

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **250.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 78 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Joel D. Fedder

Mailing Address 3590 Mistletoe Ln

City State Zip Code  
Longboat Key FL 34228-4102

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 0 9

Transaction ID: C6062634

Amount of Each Receipt this Period  
75.00

**B.**

Full Name (Last, First, Middle Initial)  
Mildred Feinberg

Mailing Address PO Box 705

City State Zip Code  
Locust Valley NY 11560-0705

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 1 / 2 0 0 9

Transaction ID: C6069341

Amount of Each Receipt this Period  
230.00

**C.**

Full Name (Last, First, Middle Initial)  
Frances G. Felton

Mailing Address 501 NW 166th St

City State Zip Code  
Edmond OK 73003-6756

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 0 / 2 0 0 9

Transaction ID: C6074989

Amount of Each Receipt this Period  
80.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **385.00**

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

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

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

FOR LINE NUMBER: PAGE 79 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Searcy Ferguson  
Mailing Address 3737 Atwell Ste 206  
City Dallas State TX Zip Code 75209  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed Occupation Oil Operator  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1500.00  
Date of Receipt 04 / 30 / 2009  
Transaction ID: C6056483  
Amount of Each Receipt this Period 500.00

**B.** Full Name (Last, First, Middle Initial)  
Searcy Ferguson  
Mailing Address 3737 Atwell Ste 206  
City Dallas State TX Zip Code 75209  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed Occupation Oil Operator  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1500.00  
Date of Receipt 04 / 30 / 2009  
Transaction ID: C6056497  
Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Cliff Ferry  
Mailing Address 288 W Cedar St  
City Elko State NV Zip Code 89801-2921  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 260.00  
Date of Receipt 04 / 19 / 2009  
Transaction ID: C6068165  
Amount of Each Receipt this Period 65.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1565.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 80 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Henry Feuerzeig  
Mailing Address PO Box 9547  
City St Thomas State VI Zip Code 00801-2547  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Dudley, Topper and Feuerzeig, LLP Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 04 / 06 / 2009  
Transaction ID: C6091673  
Amount of Each Receipt this Period 50.00

**B.** Full Name (Last, First, Middle Initial)  
Henry Feuerzeig  
Mailing Address PO Box 9547  
City St Thomas State VI Zip Code 00801-2547  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Dudley, Topper and Feuerzeig, LLP Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 04 / 29 / 2009  
Transaction ID: C6091704  
Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
William Finke  
Mailing Address 29 Elinor Cir  
City Waltham State MA Zip Code 02452-5712  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 525.00  
Date of Receipt 04 / 10 / 2009  
Transaction ID: C6082477  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 250.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 81 / 551  
 (check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
William Finke

Mailing Address 29 Elinor Cir

City State Zip Code  
Waltham MA 02452-5712

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6062467

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Elizabeth S. Fisher

Mailing Address 1 Maritime Plz  
Ste 1400

City State Zip Code  
San Francisco CA 94111-3504

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

Name of Employer N/A Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6056445

Amount of Each Receipt this Period  
30400.00

**C.** Full Name (Last, First, Middle Initial)  
Edward B. Flaherty

Mailing Address 2105 20th Street  
No. 1

City State Zip Code  
San Francisco CA 94107

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

Name of Employer ENGEO Occupation Geologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 0 / 2 0 0 9

**Transaction ID:** C6007455

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **31000.00**

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

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

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

FOR LINE NUMBER: PAGE 82 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
George Flannery

Mailing Address 1910 Knox Ave S

City State Zip Code  
Minneapolis MN 55403-2839

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 2 1 / 2 0 0 9

**Transaction ID:** C6070087

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Janet Flapan

Mailing Address 123 W Oak St  
Apt. N

City State Zip Code  
Chicago IL 60610-7834

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

Name of Employer N/A Occupation Homemaker

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 1 0 / 2 0 0 9

**Transaction ID:** C6062690

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Barbara G. Fleischman

Mailing Address 870 United Nations Plz  
Apt 37C

City State Zip Code  
New York NY 10017-1827

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 0 1 / 2 0 0 9

**Transaction ID:** C6088957

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1350.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 83 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Ryan Fong

Mailing Address 7700 College Town Dr.  
#250

City State Zip Code  
Sacramento CA 95826

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

Name of Employer Self-Employed Occupation Real Estate Developer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

Transaction ID: C6056426

Amount of Each Receipt this Period  
500.00

**B.**

Full Name (Last, First, Middle Initial)  
Ruth M. Forbis

Mailing Address 8404 La Rouche Dr

City State Zip Code  
San Diego CA 92119-1907

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
04 / 13 / 2009

Transaction ID: C6058824

Amount of Each Receipt this Period  
25.00

**C.**

Full Name (Last, First, Middle Initial)  
Ruth M. Forbis

Mailing Address 8404 La Rouche Dr

City State Zip Code  
San Diego CA 92119-1907

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
04 / 28 / 2009

Transaction ID: C6062676

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **550.00**

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

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

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

FOR LINE NUMBER: PAGE 84 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Terry H. Foreman  
 Mailing Address 1623 Sunset Dr  
 City Murray State KY Zip Code 42071-2221  
 Date of Receipt 04 / 09 / 2009  
**Transaction ID: C6075037**  
 Amount of Each Receipt this Period 100.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 300.00

**B.** Full Name (Last, First, Middle Initial)  
Terry H. Foreman  
 Mailing Address 1623 Sunset Dr  
 City Murray State KY Zip Code 42071-2221  
 Date of Receipt 04 / 22 / 2009  
**Transaction ID: C6089678**  
 Amount of Each Receipt this Period 50.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 300.00

**C.** Full Name (Last, First, Middle Initial)  
Frank C. Foster  
 Mailing Address 2998 Goldhill Rd  
 City Fairbanks State AK Zip Code 99709-2319  
 Date of Receipt 04 / 28 / 2009  
**Transaction ID: C6058013**  
 Amount of Each Receipt this Period 200.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Information Requested Occupation Information Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 350.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 85 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)

Lynda K. Fox

Mailing Address 19630 Juna Ln

City State Zip Code  
Saratoga CA 95070-6419

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

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	0	9

Transaction ID: C6090021

Amount of Each Receipt this Period

500.00
--------

**B.**

Full Name (Last, First, Middle Initial)

Edna N. Frady

Mailing Address 102 Tollgate Way

City State Zip Code  
Falls Church VA 22046-3516

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

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 322.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	0	9

Transaction ID: C6069338

Amount of Each Receipt this Period

100.00
--------

**C.**

Full Name (Last, First, Middle Initial)

Rainold J. Franek

Mailing Address 400 Madrona Ave. SE Apt. 408

City State Zip Code  
Salem OR 97302

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	0	9

Transaction ID: C6073209

Amount of Each Receipt this Period

150.00
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**SUBTOTAL** of Receipts This Page (optional) ..... ►

750.00
--------

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 86 / 551
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mary Frank		Date of Receipt
	Mailing Address 445 Grand Bay Drive #1211		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 2 2 / 2 0 0 9
	City	State	Zip Code
	Key Biscayne	FL	33149
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> C6056373
Name of Employer N/A		Occupation Homemaker	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1000.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Ellen Fredel		Date of Receipt
	Mailing Address 3195 Porter St NW		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 0 1 / 2 0 0 9
	City	State	Zip Code
	Washington	DC	20008-3210
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> C6090982
Name of Employer Ellen A. Fredel, Pc		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

<b>C.</b>	Full Name (Last, First, Middle Initial) John Freidenrich		Date of Receipt
	Mailing Address 300 Hamilton Avenue 4th Floor		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 2 0 / 2 0 0 9
	City	State	Zip Code
	Palo Alto	CA	94301-2573
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> C6056350
Name of Employer Regis Management		Occupation Investor	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 6250.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 87 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)

Beatrice Friedman

Mailing Address 990 Boulevard Of The Arts  
Apt 1702

City State Zip Code  
Sarasota FL 34236-4880

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 550.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 0 / 2 0 0 9

Transaction ID: C6075188

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

Beatrice Friedman

Mailing Address 990 Boulevard Of The Arts  
Apt 1702

City State Zip Code  
Sarasota FL 34236-4880

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 550.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6078233

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Phyllis K. Friedman

Mailing Address 119 Reservoir Rd

City State Zip Code  
Hillsborough CA 94010-6956

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 1 / 2 0 0 9

Transaction ID: C6064445

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

600.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 88 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Robert E. Friedman

Mailing Address 2275 Summit Dr

City Hillsborough State CA Zip Code 94010-6146

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

Name of Employer Corporation for Enterprise Dev. Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

MM / DD / YYYY  
04 / 29 / 2009

Transaction ID: C6007449

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)  
Robert C. Friese

Mailing Address 1 Maritime Plaza #1800

City San Francisco State CA Zip Code 94111

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

Name of Employer Shartsis Friese LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

MM / DD / YYYY  
04 / 17 / 2009

Transaction ID: C6007441

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Robert Gardon

Mailing Address 900 University St. Apt. 1102

City Seattle State WA Zip Code 98101

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 235.00

Date of Receipt

MM / DD / YYYY  
04 / 02 / 2009

Transaction ID: C6088837

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

3600.00

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

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

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

FOR LINE NUMBER: PAGE 89 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Robert Gardon

Mailing Address 900 University St.  
Apt. 1102

City State Zip Code  
Seattle WA 98101

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 3 / 2 0 0 9

**Transaction ID:** C6088838

Amount of Each Receipt this Period  
35.00

**B.** Full Name (Last, First, Middle Initial)  
Robert N. Garner

Mailing Address 315 Hemlock Cir

City State Zip Code  
Lincoln MA 01773-4923

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6062140

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Joan E. Garrison

Mailing Address 1080 Patterson St  
Apt 205

City State Zip Code  
Eugene OR 97401-3319

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6057937

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **285.00**

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

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

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

FOR LINE NUMBER: PAGE 90 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Cloma Gates

Mailing Address 414 Bryan Rd

City State Zip Code  
Ottumwa IA 52501-1107

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 4 / 2 0 0 9

**Transaction ID:** C6058597

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
George Gaynes

Mailing Address 3344 Campanil Dr

City State Zip Code  
Santa Barbara CA 93109-1017

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

Name of Employer Gaynes McLerie, Inc. Occupation Actor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 8 / 2 0 0 9

**Transaction ID:** C6057705

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Richard A. Gephardt

Mailing Address 822 Capitol Square PI SW

City State Zip Code  
Washington DC 20024

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

Name of Employer Gephardt Group Occupation President and CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 7 / 2 0 0 9

**Transaction ID:** C6056392

Amount of Each Receipt this Period  
30400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **30850.00**

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

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

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

FOR LINE NUMBER: PAGE 91 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
James F. Gerrits  
Mailing Address 924 N Riverside Ave  
City State Zip Code  
Saint Clair MI 48079-4265  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00  
Date of Receipt 04 / 15 / 2009  
Transaction ID: C6069803  
Amount of Each Receipt this Period 150.00

**B.** Full Name (Last, First, Middle Initial)  
Ann G. Getty  
Mailing Address 2880 Broadway St  
City State Zip Code  
San Francisco CA 94115-1061  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed Occupation Interior Designer  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 14289.57  
Date of Receipt 04 / 13 / 2009  
Transaction ID: C6007343  
Amount of Each Receipt this Period 14289.57  
\* In-Kind: Event Expenses

**C.** Full Name (Last, First, Middle Initial)  
Gordon Getty  
Mailing Address 2880 Broadway St  
City State Zip Code  
San Francisco CA 94115-1061  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed Occupation Philanthropist  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 14289.57  
Date of Receipt 04 / 13 / 2009  
Transaction ID: C6007342  
Amount of Each Receipt this Period 14289.57  
\* In-Kind: Event Expenses

**SUBTOTAL** of Receipts This Page (optional) ..... ► 28729.14  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 92 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Celia Gilbert

Mailing Address 15 Gray Gdns W

City State Zip Code  
Cambridge MA 02138-2311

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

Name of Employer Occupation  
Self-Employed Poet

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 7 / 2 0 0 9

Transaction ID: C6089645

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Scott K. Ginsburg

Mailing Address 4610 Isabella Ln

City State Zip Code  
Dallas TX 75229-5412

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

Name of Employer Occupation  
DG East Channel Inc. CEO

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6056456

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Joan D. Glatthorn

Mailing Address 6331 Camino De La Costa

City State Zip Code  
La Jolla CA 92037-6526

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

Name of Employer Occupation  
Self-Employed Attorney

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6057640

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

2250.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 93 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Dora H. Going

Mailing Address 601 5th Ave. E Apt. 319

City Tuscaloosa State AL Zip Code 35401

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 04 / 14 / 2009

Transaction ID: C6080534

Amount of Each Receipt this Period: 300.00

**B.** Full Name (Last, First, Middle Initial)  
Barbara Goldenberg

Mailing Address 12938 Evanston St

City Los Angeles State CA Zip Code 90049-3715

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 04 / 30 / 2009

Transaction ID: C6057558

Amount of Each Receipt this Period: 300.00

**C.** Full Name (Last, First, Middle Initial)  
Frederic Gooding

Mailing Address 8915 Montgomery Ave

City Chevy Chase State MD Zip Code 20815-4703

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

Name of Employer Force 3 Inc Occupation Programmer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 04 / 20 / 2009

Transaction ID: C6062911

Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1100.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 94 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial) Barbara E. Goy		Date of Receipt MM / DD / YYYY 04 / 01 / 2009
Mailing Address 2545 SW Terwilliger Blvd Apt. 906		<b>Transaction ID:</b> C6089030
City Portland	State OR	Zip Code 97201
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.00
Name of Employer N/A	Occupation N/A	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

**B.**

Full Name (Last, First, Middle Initial) Barbara E. Goy		Date of Receipt MM / DD / YYYY 04 / 03 / 2009
Mailing Address 2545 SW Terwilliger Blvd Apt. 906		<b>Transaction ID:</b> C6089031
City Portland	State OR	Zip Code 97201
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.00
Name of Employer N/A	Occupation N/A	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

**C.**

Full Name (Last, First, Middle Initial) Frederick H. Graefe		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
Mailing Address 319 Constitution Ave NE		<b>Transaction ID:</b> C6056520
City Washington	State DC	Zip Code 20002-5913
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2500.00
Name of Employer Law Offices of Frederick Graefe PLLC	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2540.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 95 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Frederick H. Graefe

Mailing Address 319 Constitution Ave NE

City Washington State DC Zip Code 20002-5913

FEC ID number of contributing federal political committee. C

Name of Employer Law Offices of Frederick Graefe PLLC Occupation Partner

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6056522

Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Steve Graham

Mailing Address 5231 Georgies Ln

City Chincoteague State VA Zip Code 23336-2233

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Disabled

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt MM / DD / YYYY  
04 / 09 / 2009

**Transaction ID:** C6060233

Amount of Each Receipt this Period 50.00

**C.** Full Name (Last, First, Middle Initial)  
Steve Graham

Mailing Address 5231 Georgies Ln

City Chincoteague State VA Zip Code 23336-2233

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Disabled

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt MM / DD / YYYY  
04 / 14 / 2009

**Transaction ID:** C6060232

Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1150.00

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

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

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

FOR LINE NUMBER: PAGE 96 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Alvin Gray

Mailing Address 15 Fairway Trl

City State Zip Code  
Moreland Hills OH 44022

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 213.80

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6075391

Amount of Each Receipt this Period  
111.00

**B.** Full Name (Last, First, Middle Initial)  
Jonathan R. Green

Mailing Address 601 Chateau Dr  
4400 Oak Hill Rd. Apt. A

City State Zip Code  
Evansville IN 47715-4164

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

Name of Employer St Marys Medical Center Occupation Physician Assistant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
04 / 17 / 2009

**Transaction ID:** C6059140

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Jonathan R. Green

Mailing Address 601 Chateau Dr  
4400 Oak Hill Rd. Apt. A

City State Zip Code  
Evansville IN 47715-4164

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

Name of Employer St Marys Medical Center Occupation Physician Assistant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
04 / 24 / 2009

**Transaction ID:** C6090020

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **361.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 97 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)

Anne S. Greenwald

Mailing Address 1503 Sheffield Lane

City State Zip Code  
Wynnewood PA 19096

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6074402

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Charles E. Griffith

Mailing Address PO Box 1409

City State Zip Code  
Alief TX 77411-1409

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

Name of Employer Information Requested Occupation Information Requested  
Klaus Union Inc. Application Engineer

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 7 / 2 0 0 9

Transaction ID: C6061448

Amount of Each Receipt this Period

105.00

**C.**

Full Name (Last, First, Middle Initial)

Thomas Griswold

Mailing Address 85 Kingston Rd

City State Zip Code  
Kensington CA 94707-1321

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

Name of Employer Information Requested Occupation Information Requested  
Internal Revenue Service Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 8 / 2 0 0 9

Transaction ID: C6090819

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

605.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 / 551
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Judith E. Grose		Date of Receipt
	Mailing Address 2 palliser road		<input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Irvington	NY	10533
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> C6089710
Name of Employer Self-Employed		Occupation	Amount of Each Receipt this Period
Self-Employed		Psychiatrist	<input type="text" value="100.00"/>
Receipt For:		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="400.00"/>	
<input type="checkbox"/> Other (specify) ▼			

<b>B.</b>	Full Name (Last, First, Middle Initial) Judith E. Grose		Date of Receipt
	Mailing Address 2 palliser road		<input type="text" value="04"/> / <input type="text" value="09"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Irvington	NY	10533
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> C6089711
Name of Employer Self-Employed		Occupation	Amount of Each Receipt this Period
Self-Employed		Psychiatrist	<input type="text" value="250.00"/>
Receipt For:		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="400.00"/>	
<input type="checkbox"/> Other (specify) ▼			

<b>C.</b>	Full Name (Last, First, Middle Initial) Gary Gross		Date of Receipt
	Mailing Address 5499 Glenn Lakes Drive Suite 100		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Dallas	TX	75231
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> C6056464
Name of Employer Self-Employed		Occupation	Amount of Each Receipt this Period
Self-Employed		Social Worker	<input type="text" value="2000.00"/>
Receipt For:		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="2000.00"/>	
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="2350.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 99 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Helen G. Grossman  
Mailing Address 140 Avenida Dr  
City Berkeley State CA Zip Code 94708-2125  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 04 / 22 / 2009  
Transaction ID: C6077434  
Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
Garrett Gruener  
Mailing Address PO Box 5018  
City Berkeley State CA Zip Code 94705  
FEC ID number of contributing federal political committee. **C**  
Name of Employer ATLA Partners Occupation Venture Capitalist  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 30400.00  
Date of Receipt 04 / 30 / 2009  
Transaction ID: C6056440  
Amount of Each Receipt this Period 30400.00

**C.** Full Name (Last, First, Middle Initial)  
Karel K. Guefen  
Mailing Address 702 N Maple Dr  
City Beverly Hills State CA Zip Code 90210-3411  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 04 / 30 / 2009  
Transaction ID: C6065451  
Amount of Each Receipt this Period 210.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 30860.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 100 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
George Gund, III

Mailing Address 39 Mesa St  
Ste 300

City San Francisco State CA Zip Code 94129-1019

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

Name of Employer Self-Employed Occupation Philanthropist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt 04 / 24 / 2009  
Transaction ID: C6056381  
Amount of Each Receipt this Period 30400.00

**B.** Full Name (Last, First, Middle Initial)  
Louise L. Gund

Mailing Address 41 The Plaza

City Berkeley State CA Zip Code 94705

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

Name of Employer Self-Employed Occupation Philanthropist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt 04 / 07 / 2009  
Transaction ID: C6007336  
Amount of Each Receipt this Period 30400.00

**C.** Full Name (Last, First, Middle Initial)  
Gregory Gustafson

Mailing Address 11 Pine Hill Dr.

City South Salem State NY Zip Code 10590

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

Name of Employer Cardiovascular Associates of NY Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 04 / 01 / 2009  
Transaction ID: C6089238  
Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 60850.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 101 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Roberta Hadley

Mailing Address 4355 Emory Way

City State Zip Code  
Livermore CA 94550-4917

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
04 / 21 / 2009

**Transaction ID:** C6062881

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Daniel Hamermesh

Mailing Address 4101 Firstview Dr

City State Zip Code  
Austin TX 78731-3903

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

Name of Employer Univ of Texas Occupation Professor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt  
MM / DD / YYYY  
04 / 01 / 2009

**Transaction ID:** C6089387

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
John W. Hamilton

Mailing Address PO Box 143

City State Zip Code  
Oakville CA 94562-0143

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6064743

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **700.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 102 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Elliot Handler

Mailing Address 2222 Avenue of the Stars

City State Zip Code  
Los Angeles CA 90067

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

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 380.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 4 / 2 0 0 9

Transaction ID: C6061159

Amount of Each Receipt this Period

230.00

**B.**

Full Name (Last, First, Middle Initial)  
Grace L. Hansen

Mailing Address 26880 Havelock Dr

City State Zip Code  
Dearborn Heights MI 48127-3639

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

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 900.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 0 / 2 0 0 9

Transaction ID: C6082390

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)  
Melinda Hardin

Mailing Address 7 Wharf St

City State Zip Code  
Alexandria VA 22314-3881

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 3 / 2 0 0 9

Transaction ID: C6065009

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1030.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 103 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Melinda Hardin

Mailing Address 7 Wharf St

City State Zip Code  
Alexandria VA 22314-3881

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

Name of Employer N/A Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6059866

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Veronica Hari

Mailing Address 21 Park Ave

City State Zip Code  
Wethersfield CT 06109-1630

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
04 / 14 / 2009

**Transaction ID:** C6086339

Amount of Each Receipt this Period  
300.00

**C.**

Full Name (Last, First, Middle Initial)  
Lorraine Hariton

Mailing Address PO Box 1707

City State Zip Code  
Los Altos CA 94023

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

Name of Employer Xeolux Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
04 / 27 / 2009

**Transaction ID:** C6007454

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2550.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 104 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Hugh Harless

Mailing Address 4215 W Beach Park Dr

City Tampa State FL Zip Code 33609-3813

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 21 / 2009

Transaction ID: C6062697

Amount of Each Receipt this Period 300.00

**B.**

Full Name (Last, First, Middle Initial)  
Martin A. Harmon

Mailing Address 4020 Sierra College Blvd Ste 200

City Rocklin State CA Zip Code 95677-3906

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

Name of Employer Western Care Construction Occupation Businessman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 04 / 20 / 2009

Transaction ID: C6056361

Amount of Each Receipt this Period 10000.00

**C.**

Full Name (Last, First, Middle Initial)  
Evelyn B. Harris

Mailing Address 39 Old Sudbury Rd

City Lincoln State MA Zip Code 01773-4806

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

Name of Employer Self-Employed Occupation Musician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt 04 / 19 / 2009

Transaction ID: C6062506

Amount of Each Receipt this Period 51.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10351.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 105 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
George F. Harrison

Mailing Address 111 Duncannon Rd

City State Zip Code  
Bel Air MD 21014-5624

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt M M / D D / Y Y Y Y Y  
04 / 01 / 2009

**Transaction ID:** C6090766

Amount of Each Receipt this Period 50.00

**B.**

Full Name (Last, First, Middle Initial)  
Thomas R. Harrison

Mailing Address 2440 Greenwich St

City State Zip Code  
San Francisco CA 94123-3306

FEC ID number of contributing federal political committee. C

Name of Employer Laborers Union Local 261 Sf Ca Occupation Union Rep

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt M M / D D / Y Y Y Y Y  
04 / 13 / 2009

**Transaction ID:** C6059662

Amount of Each Receipt this Period 105.00

**C.**

Full Name (Last, First, Middle Initial)  
Jack Hartley

Mailing Address PO Box 36 Unit 12

City State Zip Code  
Alpine AZ 85920-0036

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt M M / D D / Y Y Y Y Y  
04 / 13 / 2009

**Transaction ID:** C6058595

Amount of Each Receipt this Period 150.00

**SUBTOTAL** of Receipts This Page (optional) ..... 305.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 106 / 551  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Jack Hartley

Mailing Address PO Box 36  
Unit 12

City Alpine State AZ Zip Code 85920-0036

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
04 / 27 / 2009

**Transaction ID:** C6057479

Amount of Each Receipt this Period  
150.00

**B.**

Full Name (Last, First, Middle Initial)  
Eileen Hayward

Mailing Address PO Box 352139  
Apt. 331

City Palm Coast State FL Zip Code 32135-2139

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
MM / DD / YYYY  
04 / 10 / 2009

**Transaction ID:** C6068419

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Eileen Hayward

Mailing Address PO Box 352139  
Apt. 331

City Palm Coast State FL Zip Code 32135-2139

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
MM / DD / YYYY  
04 / 14 / 2009

**Transaction ID:** C6068420

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 190.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 107 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Eileen Hayward

Mailing Address PO Box 352139  
Apt. 331

City State Zip Code  
Palm Coast FL 32135-2139

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 3 / 2 0 0 9

Transaction ID: C6068421

Amount of Each Receipt this Period  
25.00

**B.**

Full Name (Last, First, Middle Initial)  
Lloyd L. Hefner

Mailing Address 2835 Berwick Rd

City State Zip Code  
Birmingham AL 35213-3413

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 3 / 2 0 0 9

Transaction ID: C6077931

Amount of Each Receipt this Period  
110.00

**C.**

Full Name (Last, First, Middle Initial)  
Lloyd L. Hefner

Mailing Address 2835 Berwick Rd

City State Zip Code  
Birmingham AL 35213-3413

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6077930

Amount of Each Receipt this Period  
110.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **245.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 108 / 551  
 (check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
John J. Heinsius

Mailing Address PO Box 4610

City Modesto State CA Zip Code 95352-4610

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 04 / 17 / 2009  
**Transaction ID: C6007440**  
 Amount of Each Receipt this Period: 100.00

**B.** Full Name (Last, First, Middle Initial)  
John J. Heinsius

Mailing Address PO Box 4610

City Modesto State CA Zip Code 95352-4610

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 04 / 28 / 2009  
**Transaction ID: C6082857**  
 Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
Harriet J. Helman

Mailing Address 70 Juniper Avenue

City Ronkonkoma State NY Zip Code 11779

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 04 / 22 / 2009  
**Transaction ID: C6089550**  
 Amount of Each Receipt this Period: 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **250.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 109 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Harriet J. Helman

Mailing Address 70 Juniper Avenue

City State Zip Code  
Ronkonkoma NY 11779

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 7 / 2 0 0 9

Transaction ID: C6089551

Amount of Each Receipt this Period  
35.00

**B.**

Full Name (Last, First, Middle Initial)  
Elayne R. Hengler

Mailing Address PO Box 97

City State Zip Code  
Hanover MN 55341-0097

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 2 / 2 0 0 9

Transaction ID: C6068232

Amount of Each Receipt this Period  
150.00

**C.**

Full Name (Last, First, Middle Initial)  
Arthur H. Hertz

Mailing Address 3195 Ponce De Leon Blvd

City State Zip Code  
Coral Gables FL 33134-6801

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

Name of Employer Occupation  
Wometco Enterprises, Inc. Chairman And CEO

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 12500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 8 / 2 0 0 9

Transaction ID: C6056353

Amount of Each Receipt this Period  
15000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

15185.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 110 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Cheryl D. Hess

Mailing Address 550 Colusa Ave

City Berkeley State CA Zip Code 94707-1531

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

Name of Employer Self-Employed Occupation CPA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt: 04 / 01 / 2009

Transaction ID: C6089695

Amount of Each Receipt this Period: 50.00

**B.**

Full Name (Last, First, Middle Initial)  
Cheryl D. Hess

Mailing Address 550 Colusa Ave

City Berkeley State CA Zip Code 94707-1531

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

Name of Employer Self-Employed Occupation CPA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt: 04 / 03 / 2009

Transaction ID: C6089696

Amount of Each Receipt this Period: 50.00

**C.**

Full Name (Last, First, Middle Initial)  
Cheryl D. Hess

Mailing Address 550 Colusa Ave

City Berkeley State CA Zip Code 94707-1531

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

Name of Employer Self-Employed Occupation CPA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt: 04 / 08 / 2009

Transaction ID: C6088767

Amount of Each Receipt this Period: 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 150.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 111 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Cheryl D. Hess

Mailing Address 550 Colusa Ave

City State Zip Code  
Berkeley CA 94707-1531

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

Name of Employer Self-Employed Occupation  
CPA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
950.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 4 / 2 0 0 9

**Transaction ID:** C6088768

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Cheryl D. Hess

Mailing Address 550 Colusa Ave

City State Zip Code  
Berkeley CA 94707-1531

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

Name of Employer Self-Employed Occupation  
CPA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
950.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 7 / 2 0 0 9

**Transaction ID:** C6088769

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
Constance Hickey

Mailing Address 11905 Jubal Early Ct

City State Zip Code  
Potomac MD 20854-3428

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

Name of Employer N/A Occupation  
Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 0 / 2 0 0 9

**Transaction ID:** C6083288

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **300.00**

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

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

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

FOR LINE NUMBER: PAGE 112 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Winston H. Hickox  
Mailing Address 700 Walnut Glen Ct.  
City Sacramento State CA Zip Code 95864  
FEC ID number of contributing federal political committee. **C**  
Name of Employer California Strategies Occupation Consultant  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 04 / 30 / 2009  
Transaction ID: C6056427  
Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Hollie M. Hilden  
Mailing Address 237 Bighorn Ct  
City Vacaville State CA Zip Code 95687-3438  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 04 / 07 / 2009  
Transaction ID: C6064354  
Amount of Each Receipt this Period 50.00

**C.** Full Name (Last, First, Middle Initial)  
Hollie M. Hilden  
Mailing Address 237 Bighorn Ct  
City Vacaville State CA Zip Code 95687-3438  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 04 / 30 / 2009  
Transaction ID: C6070502  
Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1100.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 113 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Eugene A. Hildreth		Date of Receipt MM / DD / YYYY 04 / 30 / 2009		
	Mailing Address Apt. 129 Apt. 129		<b>Transaction ID:</b> C6067453		
	City Reading	State PA	Zip Code 19610	Amount of Each Receipt this Period 200.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Information Requested		Occupation Information Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 310.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Marga Hirst		Date of Receipt MM / DD / YYYY 04 / 30 / 2009		
	Mailing Address 3225 Oyster Bay Ave		<b>Transaction ID:</b> C6062616		
	City Davis	State CA	Zip Code 95616-2669	Amount of Each Receipt this Period 228.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer N/A		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 228.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Richard D. Holland		Date of Receipt MM / DD / YYYY 04 / 30 / 2009		
	Mailing Address 1501 S 80th St		<b>Transaction ID:</b> C6077486		
	City Omaha	State NE	Zip Code 68124-1423	Amount of Each Receipt this Period 1500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer N/A		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00			

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

1928.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 114 / 551  
 (check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Maria J. Hoog

Mailing Address 9 Concord Greene Unit 6

City Concord State MA Zip Code 01742

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt: 04 / 28 / 2009  
**Transaction ID: C6066994**  
 Amount of Each Receipt this Period: 75.00

**B.** Full Name (Last, First, Middle Initial)  
Maria J. Hoog

Mailing Address 9 Concord Greene Unit 6

City Concord State MA Zip Code 01742

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt: 04 / 28 / 2009  
**Transaction ID: C6066995**  
 Amount of Each Receipt this Period: 75.00

**C.** Full Name (Last, First, Middle Initial)  
Maria J. Hoog

Mailing Address 9 Concord Greene Unit 6

City Concord State MA Zip Code 01742

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt: 04 / 29 / 2009  
**Transaction ID: C6066993**  
 Amount of Each Receipt this Period: 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 175.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 115 / 551  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial) Ramon Hooper		Date of Receipt MM / DD / YYYY 04 / 08 / 2009
Mailing Address 416 W Padre St Apt 11		<b>Transaction ID:</b> C6075090
City Santa Barbara	State CA	Zip Code 93105-4242
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Augustus Prada	Occupation Landscaping	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	

**B.**

Full Name (Last, First, Middle Initial) Ramon Hooper		Date of Receipt MM / DD / YYYY 04 / 08 / 2009
Mailing Address 416 W Padre St Apt 11		<b>Transaction ID:</b> C6075091
City Santa Barbara	State CA	Zip Code 93105-4242
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Augustus Prada	Occupation Landscaping	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	

**C.**

Full Name (Last, First, Middle Initial) Ramon Hooper		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
Mailing Address 416 W Padre St Apt 11		<b>Transaction ID:</b> C6074032
City Santa Barbara	State CA	Zip Code 93105-4242
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Augustus Prada	Occupation Landscaping	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	400.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 116 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial) Thomas Hooton		Date of Receipt MM / DD / YYYY 04 / 17 / 2009
Mailing Address 3802 47th Ave NE 425 Bianca Ave.		Transaction ID: C6068621
City Seattle	State Zip Code WA 98105-5221	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer U of WA	Occupation Physician	Aggregate Year-to-Date ▼ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**B.**

Full Name (Last, First, Middle Initial) Tadashi T. Horino		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
Mailing Address 1790 Marich Way		Transaction ID: C6063569
City Mountain View	State Zip Code CA 94040-2315	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
Name of Employer N/A	Occupation Retired	Aggregate Year-to-Date ▼ 336.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**C.**

Full Name (Last, First, Middle Initial) Elizabeth F. Hornbeck		Date of Receipt MM / DD / YYYY 04 / 17 / 2009
Mailing Address 563 Cottonwood Court		Transaction ID: C6058825
City Dayton	State Zip Code OH 45429	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 365.00
Name of Employer N/A	Occupation Retired	Aggregate Year-to-Date ▼ 365.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	641.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 117 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Vivian A. Houghton

Mailing Address 857 Bennett St.

City State Zip Code  
Wilmington DE 19801

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 9 / 2 0 0 9

Transaction ID: C6076352

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Polly H. Howells

Mailing Address 484 1st St

City State Zip Code  
Brooklyn NY 11215-2606

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

Name of Employer Self-Employed Occupation Psychotherapist

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 1 / 2 0 0 9

Transaction ID: C6083453

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
A. Joseph Huerta

Mailing Address 5002 Oakmont

City State Zip Code  
Corpus Christi TX 78413

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

Name of Employer Huerta Law Firm Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 0 9

Transaction ID: C6090617

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

600.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 118 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)

Richard L. Huggins

Mailing Address 1119 Candlewood Dr

City State Zip Code  
Lakeland FL 33813-2854

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

Name of Employer Occupation  
Presbyterian Church (Usa) Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 0 9

Transaction ID: C6089575

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)

Vester T. Hughes, Jr.

Mailing Address 1717 Main St  
Ste. 2800

City State Zip Code  
Dallas TX 75201-4612

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

Name of Employer Occupation  
Hughes & Luce Attorney

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1230.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6056461

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)

Beverly J. Huma

Mailing Address 11619 Northdale Dr  
Apt. 29

City State Zip Code  
Moorpark CA 93021-3708

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

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 4 / 2 0 0 9

Transaction ID: C6067876

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) .....

1150.00

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

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

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

FOR LINE NUMBER: PAGE 119 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Kris Huntington

Mailing Address 136 Channing Ln  
317 Granville Rd.

City State Zip Code  
Chapel Hill NC 27516-9153

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
04 / 19 / 2009

**Transaction ID:** C6069293

Amount of Each Receipt this Period  
75.00

**B.** Full Name (Last, First, Middle Initial)  
G. David Hurd

Mailing Address 300 Walnut St  
Unit 183

City State Zip Code  
Des Moines IA 50309-2244

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6056477

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
Khalid Husain

Mailing Address 24501 Fm 2100 Rd

City State Zip Code  
Huffman TX 77336-4341

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

Name of Employer Huffman Shopping Center Occupation Businessman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6056486

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5075.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 120 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Lee W. Hydeman

Mailing Address PO Box 623

City State Zip Code  
Sonoita AZ 85637-0623

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

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 0 9

Transaction ID: C6064314

Amount of Each Receipt this Period  
300.00

**B.**

Full Name (Last, First, Middle Initial)  
Toshiro Igarashi

Mailing Address 18931 Christina Ave

City State Zip Code  
Cerritos CA 90703-8422

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

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 1 / 2 0 0 9

Transaction ID: C6091227

Amount of Each Receipt this Period  
50.00

**C.**

Full Name (Last, First, Middle Initial)  
Toshiro Igarashi

Mailing Address 18931 Christina Ave

City State Zip Code  
Cerritos CA 90703-8422

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

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 2 / 2 0 0 9

Transaction ID: C6090761

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

400.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 121 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Stanley Ilhardt

Mailing Address 5682 Hutchinson Rd.

City State Zip Code  
Batavia OH 45103

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
04 / 10 / 2009

Transaction ID: C6058602

Amount of Each Receipt this Period  
85.00

**B.**

Full Name (Last, First, Middle Initial)  
Eliot C. Ingram

Mailing Address 2107 Brandywine St.

City State Zip Code  
Philadelphia PA 19130

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

Name of Employer Self-Employed Occupation Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
04 / 24 / 2009

Transaction ID: C6067528

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
Mark H. Iola

Mailing Address 4332 Potomac Ave

City State Zip Code  
Dallas TX 75205-2629

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

Name of Employer Stanley, Mandel & Iola Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

Transaction ID: C6056519

Amount of Each Receipt this Period  
10000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **10185.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 122 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)

Phillip L. Isenberg

Mailing Address 1550 Potrero Way

City State Zip Code  
Sacramento CA 95822

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

Name of Employer Occupation  
Isenberg-Oharen Government Relations President

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6056424

Amount of Each Receipt this Period  
1000.00

**B.**

Full Name (Last, First, Middle Initial)

James Jackson

Mailing Address P.O. Box 240

City State Zip Code  
Athens OH 45701

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6067742

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)

Naren L. Jackson

Mailing Address 1507 Wilshire Blvd.

City State Zip Code  
Arlington TX 76012

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

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 735.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 0 9

Transaction ID: C6089346

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) .....

1150.00

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

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

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

FOR LINE NUMBER: PAGE 123 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Naren L. Jackson

Mailing Address 1507 Wilshire Blvd.

City State Zip Code  
Arlington TX 76012

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 735.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 7 / 2 0 0 9

**Transaction ID:** C6089347

Amount of Each Receipt this Period  
35.00

**B.** Full Name (Last, First, Middle Initial)  
Martha W. James

Mailing Address 4100 Jackson Ave  
Westminster Manor No 310

City State Zip Code  
Austin TX 78731

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 218.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 0 / 2 0 0 9

**Transaction ID:** C6082494

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Shirley J James

Mailing Address 3978 Kent Way

City State Zip Code  
San Francisco CA 94080

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 0 / 2 0 0 9

**Transaction ID:** C6060925

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **160.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 124 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Jeffrey S. Janofsky

Mailing Address 2217 Sugarcone Rd

City State Zip Code  
Baltimore MD 21209-1029

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6074439

Amount of Each Receipt this Period  
208.00

**B.**

Full Name (Last, First, Middle Initial)  
Vellore P. Jayakrishnam

Mailing Address 15 Parkview Pl

City State Zip Code  
Staten Island NY 10310-3128

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 8 / 2 0 0 9

**Transaction ID:** C6058743

Amount of Each Receipt this Period  
220.00

**C.**

Full Name (Last, First, Middle Initial)  
Theodore Jean-Francois

Mailing Address 3 Behnke Ct.

City State Zip Code  
Rockville Centre NY 11570

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

Name of Employer Self-Employed Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 8 / 2 0 0 9

**Transaction ID:** C6066281

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **478.00**

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

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

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

FOR LINE NUMBER: PAGE 125 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Robert Jeanne

Mailing Address 609 Hilltop Dr

City Madison State WI Zip Code 53711-1358

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

Name of Employer Univ of Wisconsin Occupation Information Requested

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 09 / 2009  
**Transaction ID: C6059142**  
 Amount of Each Receipt this Period 150.00

**B.** Full Name (Last, First, Middle Initial)  
Steve Baughman Jensen

Mailing Address 1543 Eastus Dr

City Dallas State TX Zip Code 75208-2512

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

Name of Employer Allen and Stewart Occupation Attorney

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 30 / 2009  
**Transaction ID: C6056475**  
 Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Daniel F. Johnson

Mailing Address 3652 Tamarack Ln

City Eau Claire State WI Zip Code 54701-7264

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 29 / 2009  
**Transaction ID: C6057082**  
 Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1400.00

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

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

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

FOR LINE NUMBER: PAGE 126 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Edwin Johnson

Mailing Address 3900 Connecticut Ave NW  
Apt 204G

City Washington State DC Zip Code 20008-2498

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 537.67

Date of Receipt 04 / 14 / 2009  
Transaction ID: C6058884  
Amount of Each Receipt this Period 537.67

**B.** Full Name (Last, First, Middle Initial)  
Leonard Johnson

Mailing Address 4720 Geranium Pl

City Oakland State CA Zip Code 94619-3053

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 28 / 2009  
Transaction ID: C6083027  
Amount of Each Receipt this Period 50.00

**C.** Full Name (Last, First, Middle Initial)  
Patrick A. Jolly

Mailing Address 622 Schneider Ct

City Westbury State NY Zip Code 11590-1420

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt 04 / 28 / 2009  
Transaction ID: C6063443  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 687.67

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 127 / 551  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Carmen R. Jones

Mailing Address 180 Hancock St

City State Zip Code  
Brooklyn NY 11216-2104

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
MM / DD / YYYY  
04 / 10 / 2009

**Transaction ID:** C6082104

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
Paul R. Jones

Mailing Address 13780 Torrey Pines Dr.

City State Zip Code  
Auburn CA 95602

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
04 / 21 / 2009

**Transaction ID:** C6067009

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
Robert H Jones

Mailing Address 1870 Oakridge Dr

City State Zip Code  
Akron OH 44313-5412

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
04 / 22 / 2009

**Transaction ID:** C6064777

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **650.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 128 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Tyler Jones

Mailing Address 6738 Winton St

City State Zip Code  
Dallas TX 75214-2748

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

Name of Employer Occupation  
McKesson Corporation Marketing

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
310.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 2 / 2 0 0 9

Transaction ID: C6090099

Amount of Each Receipt this Period  
15.00

**B.**

Full Name (Last, First, Middle Initial)  
Robert A. Joseph

Mailing Address 5679 Monroe St. Apt. 1019

City State Zip Code  
Sylvania OH 43560

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 1 / 2 0 0 9

Transaction ID: C6078923

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
Milton Jupiter

Mailing Address 441 N Oakhurst Dr. Apt. 705

City State Zip Code  
Beverly Hills CA 90210

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
309.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6075813

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

365.00

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

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

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

FOR LINE NUMBER: PAGE 129 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Alvin Kahn

Mailing Address 730 Hungry Harbor Rd

City State Zip Code  
Valley Stream NY 11581-3039

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

Name of Employer Occupation  
Brookdale Hospital Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 0 9

**Transaction ID:** C6068798

Amount of Each Receipt this Period  
75.00

**B.** Full Name (Last, First, Middle Initial)  
Wolf Kahn

Mailing Address 217 W 21st St

City State Zip Code  
New York NY 10011-3101

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

Name of Employer Occupation  
Self-Employed Artist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 8 / 2 0 0 9

**Transaction ID:** C6058222

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Henry Kaminer

Mailing Address 95 Charles St. Apt. 5

City State Zip Code  
New York NY 10014-2621

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 4 / 2 0 0 9

**Transaction ID:** C6082014

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **325.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 130 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial) Allan Kanner		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
Mailing Address 1550 Dufossat St		<b>Transaction ID:</b> C6056534
City State Zip Code New Orleans LA 70115-4023	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1000.00
Name of Employer Allan Kanner & Associates	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**B.**

Full Name (Last, First, Middle Initial) Herschel Kanter		Date of Receipt MM / DD / YYYY 04 / 02 / 2009
Mailing Address 5726 28th St N		<b>Transaction ID:</b> C6089706
City State Zip Code Arlington VA 22207-1434	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 100.00
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00	

**C.**

Full Name (Last, First, Middle Initial) Norman Kaplan		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
Mailing Address 3831 Turtle Creek Blvd Apt 20E		<b>Transaction ID:</b> C6056466
City State Zip Code Dallas TX 75219-4415	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1000.00
Name of Employer U Texas Med School	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2100.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 131 / 551  
 (check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Michael Kay

Mailing Address 98 Kendal Drive

City State Zip Code  
Oberlin OH 44074

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 0 1 / 2 0 0 9

**Transaction ID:** C6090259

Amount of Each Receipt this Period  
75.00

**B.** Full Name (Last, First, Middle Initial)  
Michael Kay

Mailing Address 98 Kendal Drive

City State Zip Code  
Oberlin OH 44074

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 1 8 / 2 0 0 9

**Transaction ID:** C6090260

Amount of Each Receipt this Period  
75.00

**C.** Full Name (Last, First, Middle Initial)  
Sally Keating

Mailing Address 2060 Oak Hammock Dr.

City State Zip Code  
Ponte Vedra Beach FL 32082

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

Name of Employer Information Requested Occupation Nurse Practitioner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 2 0 / 2 0 0 9

**Transaction ID:** C6078892

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **650.00**

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

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

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

FOR LINE NUMBER: PAGE 132 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Christina D. Kecker

Mailing Address 710 Sansome St

City State Zip Code  
San Francisco CA 94111-1704

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

Name of Employer Occupation  
Self-Employed Graphic Designer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 15200.00

Date of Receipt  
MM / DD / YYYY  
04 / 27 / 2009

**Transaction ID:** C6056538

Amount of Each Receipt this Period  
15200.00

**B.** Full Name (Last, First, Middle Initial)  
John W. Kecker

Mailing Address 710 Sansome St

City State Zip Code  
San Francisco CA 94111-1704

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

Name of Employer Occupation  
Kecker & Van Nest LLP Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 15200.00

Date of Receipt  
MM / DD / YYYY  
04 / 27 / 2009

**Transaction ID:** C6056413

Amount of Each Receipt this Period  
15200.00

**C.** Full Name (Last, First, Middle Initial)  
John R. Kellam

Mailing Address 19 Firglade Ave.

City State Zip Code  
Providence RI 02906

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
04 / 08 / 2009

**Transaction ID:** C6066026

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **30500.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 133 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Peter J. Kelly

Mailing Address 60 Highlands Ave

City Springfield State NJ Zip Code 07081-3743

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 14 / 2009

Transaction ID: C6086355

Amount of Each Receipt this Period 500.00

**B.**

Full Name (Last, First, Middle Initial)  
Rita P. Kennann

Mailing Address 10332 Kristen St.

City Cypress State CA Zip Code 90630

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 13 / 2009

Transaction ID: C6060797

Amount of Each Receipt this Period 150.00

**C.**

Full Name (Last, First, Middle Initial)  
Frances Kennedy

Mailing Address 9812 Ceralene Dr

City Fairfax State VA Zip Code 22032-1734

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

Name of Employer Self-Employed Occupation Computer Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 22 / 2009

Transaction ID: C6089024

Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **750.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 134 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Kristina Kiehl

Mailing Address 2275 Summit Dr

City Hillsborough State CA Zip Code 94010-6146

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

Name of Employer Self-Employed Occupation Community Activist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 04 / 20 / 2009  
Transaction ID: C6007450  
Amount of Each Receipt this Period: 2500.00

**B.** Full Name (Last, First, Middle Initial)  
James Killen

Mailing Address 1555 N 23rd St

City Beaumont State TX Zip Code 77706-2901

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 04 / 27 / 2009  
Transaction ID: C6073830  
Amount of Each Receipt this Period: 200.00

**C.** Full Name (Last, First, Middle Initial)  
Rodney R. Kilmer

Mailing Address 2117 N 148Th St

City Shoreline State WA Zip Code 98133-6711

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 04 / 19 / 2009  
Transaction ID: C6088573  
Amount of Each Receipt this Period: 30.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2730.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 135 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Chong O. Kim

Mailing Address 510 Main St. Apt. 742

City State Zip Code  
New York NY 10044

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 4 / 2 0 0 9

Transaction ID: C6061357

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
Chong O. Kim

Mailing Address 510 Main St. Apt. 742

City State Zip Code  
New York NY 10044

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6061358

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
Walter Kipping

Mailing Address 4744 88th Ave SE

City State Zip Code  
Mercer Island WA 98040-4329

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

Name of Employer Rainier Cold Storage Occupation Warehouseman

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 8 / 2 0 0 9

Transaction ID: C6059994

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

500.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 136 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Mary S. Kleinfeld

Mailing Address 220 W Zapata Hw 11 Pmb 413

City State Zip Code  
Laredo TX 78043

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

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 0 9

Transaction ID: C6064411

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
Robert Kline

Mailing Address 210 Berkshire Rd

City State Zip Code  
Richmond VA 23221-3239

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

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 2 / 2 0 0 9

Transaction ID: C6089236

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
Thomas J. Knox

Mailing Address 6008 Corewood Ln

City State Zip Code  
Bethesda MD 20816-2302

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

Name of Employer Occupation  
Shaw Pittman Llp Attorney

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 7 / 2 0 0 9

Transaction ID: C6074975

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

400.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 137 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial) Paul Korman		Date of Receipt MM / DD / YYYY 04 / 23 / 2009
Mailing Address 933 Willowleaf Way		<b>Transaction ID:</b> C6068956
City Potomac	State MD	Zip Code 20854-2932
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Vanness Filoman	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**B.**

Full Name (Last, First, Middle Initial) Yvonne Koshland		Date of Receipt MM / DD / YYYY 04 / 19 / 2009
Mailing Address 3991 Happy Valley Rd		<b>Transaction ID:</b> C6069178
City Lafayette	State CA	Zip Code 94549-2423
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 150.00
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

**C.**

Full Name (Last, First, Middle Initial) Paul A. Kotta		Date of Receipt MM / DD / YYYY 04 / 27 / 2009
Mailing Address PO Box 1896		<b>Transaction ID:</b> C6090628
City Soquel	State CA	Zip Code 95073
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>700.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 138 / 551  
(check only one)  
 11a    11b    11c    12  
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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Jennifer Kramar  
Mailing Address 537 Miner Rd  
City Highland Hts State OH Zip Code 44143  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Cleveland Clinic Occupation Account Rep  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 04 / 28 / 2009  
Transaction ID: C6088799  
Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
Monika Kratzmann  
Mailing Address 84 Prince St Apt 5C  
City Boston State MA Zip Code 02113-1737  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Intersystems Corp Occupation Customer Associate  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 262.00  
Date of Receipt 04 / 07 / 2009  
Transaction ID: C6064374  
Amount of Each Receipt this Period 81.00

**C.** Full Name (Last, First, Middle Initial)  
Ann Kraus  
Mailing Address 6927 Tokalon Dr  
City Dallas State TX Zip Code 75214-3829  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 04 / 30 / 2009  
Transaction ID: C6056465  
Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1331.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 139 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Peter A. Kraus

Mailing Address 4906 Shadywood Ln

City State Zip Code  
Dallas TX 75209-2024

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

Name of Employer Occupation  
Walters & Kraus LLP Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6056463

Amount of Each Receipt this Period  
1900.00

**B.** Full Name (Last, First, Middle Initial)  
Martha A Krebs

Mailing Address 23 Watercrest Ct.

City State Zip Code  
Sacramento CA 95831

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

Name of Employer Occupation  
University of California Physicist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6056447

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
Kay Kretchmar

Mailing Address 53 Village Hill Rd.

City State Zip Code  
Belmont MA 02478

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

Name of Employer Occupation  
Kaybrotta Baking Co. Baker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
04 / 14 / 2009

**Transaction ID:** C6072332

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3950.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 140 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Mathilde Krim

Mailing Address 229 Dock Ln.

City State Zip Code  
Great Neck NY 11024

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
04 / 15 / 2009

**Transaction ID:** C6072212

Amount of Each Receipt this Period  
300.00

**B.**

Full Name (Last, First, Middle Initial)  
Curtis Kueker

Mailing Address 175 Pfeiffer St., #2

City State Zip Code  
San Francisco CA 94133

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

Name of Employer Self-Employed Occupation Software Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
MM / DD / YYYY  
04 / 20 / 2009

**Transaction ID:** C6089681

Amount of Each Receipt this Period  
150.00

**C.**

Full Name (Last, First, Middle Initial)  
Renaldo G. Kuhler

Mailing Address 510 Tilden St  
Apt 3

City State Zip Code  
Raleigh NC 27605-1524

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
MM / DD / YYYY  
04 / 10 / 2009

**Transaction ID:** C6082276

Amount of Each Receipt this Period  
15.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **465.00**

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

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

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

FOR LINE NUMBER: PAGE 141 / 551  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Raminder Kumar

Mailing Address 445 E Northwater street  
#2505

City State Zip Code  
Chicago IL 60611

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

Name of Employer Occupation  
U of Chicago Physician

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 3 / 2 0 0 9

**Transaction ID:** C6090147

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Pamela Lamarra

Mailing Address 402 N West St.

City State Zip Code  
Interlachen FL 32148

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 6 / 2 0 0 9

**Transaction ID:** C6079326

Amount of Each Receipt this Period  
400.00

**C.** Full Name (Last, First, Middle Initial)  
Juanita B. Lambert

Mailing Address 3144 Oliver St NW

City State Zip Code  
Washington DC 20015-1655

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

Name of Employer Occupation  
N/A Homemaker

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6063116

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1450.00**

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

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 142 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Rudy Lance  
Mailing Address 12238 La Charca St  
City San Antonio State TX Zip Code 78233-5515  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00  
Date of Receipt 04 / 07 / 2009  
Transaction ID: C6078498  
Amount of Each Receipt this Period -800.00  
NSF

**B.** Full Name (Last, First, Middle Initial)  
John C. Land  
Mailing Address PO Drawer 138  
City Manning State SC Zip Code 29102  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Land Parker & Welch Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 04 / 15 / 2009  
Transaction ID: C6079168  
Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
Marian B. Langdon  
Mailing Address 1811 Dougherty Ferry Rd  
City Saint Louis State MO Zip Code 63122-3505  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed Occupation Educational Consultant  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 04 / 09 / 2009  
Transaction ID: C6075156  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **-600.00**  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 143 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
M. Thomas Lardner

Mailing Address 5811 Redwood Ct

City State Zip Code  
Dallas TX 75209-2439

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

Name of Employer L & B Group Occupation Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6056462

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Robin Larson

Mailing Address 105 Mitchel Ct.

City State Zip Code  
Anamosa IA 52205

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 7 / 2 0 0 9

**Transaction ID:** C6073275

Amount of Each Receipt this Period  
225.00

**C.** Full Name (Last, First, Middle Initial)  
Richard A. Launey

Mailing Address 1912 Richmond St.

City State Zip Code  
Sacramento CA 95825

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

Name of Employer SJUSD Occupation Board of Education

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6056415

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1475.00**

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

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

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

FOR LINE NUMBER: PAGE 144 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Helen Le Grow  
Mailing Address 45 Maple St  
City Islip State NY Zip Code 11751-4506  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Islip Public Library Occupation Librarian  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00  
Date of Receipt 04 / 16 / 2009  
Transaction ID: C6077309  
Amount of Each Receipt this Period 50.00

**B.** Full Name (Last, First, Middle Initial)  
George Leader  
Mailing Address 1528 Sand Hill Rd  
City Hummelstown State PA Zip Code 17036-9704  
FEC ID number of contributing federal political committee. **C**  
Name of Employer G M Leader Corp Occupation Business  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 04 / 16 / 2009  
Transaction ID: C6069380  
Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
David Lebarron  
Mailing Address 1337 Woolner Ave.  
City Fairfield State CA Zip Code 94533  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Air Science Technologies Inc. Occupation President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 04 / 09 / 2009  
Transaction ID: C6075397  
Amount of Each Receipt this Period 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1350.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 145 / 551  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Chong-Moon Lee

Mailing Address 1245 Oakmead Parkway

City State Zip Code  
Sunnyvale CA 94085

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

Name of Employer Occupation  
Ambex Venture Group Chairman/Founder

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
30400.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6056443

Amount of Each Receipt this Period  
30400.00

**B.** Full Name (Last, First, Middle Initial)  
Jerry Lee

Mailing Address 260 N Pearl St  
Apt 1P

City State Zip Code  
Albany NY 12207-1211

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

Name of Employer Occupation  
Self-Employed Attorney

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
04 / 14 / 2009

**Transaction ID:** C6082509

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Timothy Lee

Mailing Address 2511 Bennington Dr

City State Zip Code  
San Bruno CA 94066-3907

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

Name of Employer Occupation  
City And County Of San Francisco Administrative Law Judge

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
04 / 22 / 2009

**Transaction ID:** C6089084

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **30850.00**

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

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

Use separate schedule(s)  
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(check only one)  
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 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
William Lehrer

Mailing Address 500 Fortune Blvd

City Milford State MA Zip Code 01757-1722

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

Name of Employer PEI Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 04 / 21 / 2009

Transaction ID: C6063565

Amount of Each Receipt this Period 375.00

**B.** Full Name (Last, First, Middle Initial)  
Andrea Leisy

Mailing Address 5148 Isador Ln

City Sacramento State CA Zip Code 95835-2063

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

Name of Employer Remy, Thomas, Moose and Manley, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 22 / 2009

Transaction ID: C6056371

Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Chrys D. Lemon

Mailing Address 1600 N Oak St Apt 628

City Arlington State VA Zip Code 22209-2763

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

Name of Employer McIntyre Law Firm Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 30 / 2009

Transaction ID: C6056411

Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2375.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 147 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Margo Lesser

Mailing Address 1044 N Glenhurst

City Birmingham State MI Zip Code 48009

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

Name of Employer Self-Employed Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 23 / 2009

Transaction ID: C6088748

Amount of Each Receipt this Period 250.00

**B.**

Full Name (Last, First, Middle Initial)  
Judith Levine

Mailing Address 19 Bertrand Drive

City Princeton State NJ Zip Code 08540

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 01 / 2009

Transaction ID: C6089808

Amount of Each Receipt this Period 100.00

**C.**

Full Name (Last, First, Middle Initial)  
Paul D. Lew

Mailing Address 54 Redding Ridge Dr

City Gaithersburg State MD Zip Code 20878-2664

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

Name of Employer Watson Wyatt Worldwide Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 17 / 2009

Transaction ID: C6083483

Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **600.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Laurie Lewin

Mailing Address 28 Hitching Post Lane

City State Zip Code  
Chappaqua NY 10514

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

Name of Employer Occupation  
Self-Employed Jewelry Designer

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 1 / 2 0 0 9

Transaction ID: C6089520

Amount of Each Receipt this Period  
150.00

**B.**

Full Name (Last, First, Middle Initial)  
Elizabeth Lewis

Mailing Address 324 6th Ave  
Apt. C57

City State Zip Code  
La Grange IL 60525-2436

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 0 / 2 0 0 9

Transaction ID: C6059493

Amount of Each Receipt this Period  
50.00

**C.**

Full Name (Last, First, Middle Initial)  
Mary Liebert

Mailing Address 3221 43rd Ave W

City State Zip Code  
Seattle WA 98199-2436

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 1 / 2 0 0 9

Transaction ID: C6089782

Amount of Each Receipt this Period  
35.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

235.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Mary Liebert  
Mailing Address 3221 43rd Ave W  
City State Zip Code  
Seattle WA 98199-2436  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 04 / 29 / 2009  
Transaction ID: C6089783  
Amount of Each Receipt this Period 75.00

**B.** Full Name (Last, First, Middle Initial)  
Ted Lieu  
Mailing Address PO Box 1309  
City State Zip Code  
Torrance CA 90505  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State of California Occupation Assembly Member  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 04 / 30 / 2009  
Transaction ID: C6056419  
Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Grace Link  
Mailing Address 2500 Valleyview Ave. Apt. 261  
City State Zip Code  
Bismarck ND 58501  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 220.00  
Date of Receipt 04 / 20 / 2009  
Transaction ID: C6084873  
Amount of Each Receipt this Period 120.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1195.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Sarah Little

Mailing Address 500 Elmington Ave.

City Nashville State TN Zip Code 37205

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 04 / 27 / 2009  
Transaction ID: C6079035  
Amount of Each Receipt this Period: 1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Earl A. Loomis

Mailing Address 125 Cove CIRCLE

City Greenport State NY Zip Code 11944

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

Name of Employer Self-Employed Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 04 / 24 / 2009  
Transaction ID: C6088701  
Amount of Each Receipt this Period: 250.00

**C.**

Full Name (Last, First, Middle Initial)  
Earl A. Loomis

Mailing Address 125 Cove CIRCLE

City Greenport State NY Zip Code 11944

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

Name of Employer Self-Employed Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 04 / 24 / 2009  
Transaction ID: C6088702  
Amount of Each Receipt this Period: 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1500.00

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

**SCHEDULE A (FEC Form 3X)  
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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Doris Lowenfels

Mailing Address 15 Grandview Ln

City State Zip Code  
Thornwood NY 10594-1802

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
04 / 01 / 2009

**Transaction ID:** C6089770

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Radomir Luza

Mailing Address 2313 Twin Silo Dr  
# A

City State Zip Code  
Blue Bell PA 19422-3281

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
04 / 17 / 2009

**Transaction ID:** C6068164

Amount of Each Receipt this Period  
210.00

**C.** Full Name (Last, First, Middle Initial)  
Audrey Lyke

Mailing Address 3516 Hopkins Dr

City State Zip Code  
Marshallton DE 19808-2913

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

Name of Employer Occupation  
Ework Energy Analyst

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2009

**Transaction ID:** C6059911

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 560.00

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

**SCHEDULE A (FEC Form 3X)  
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Use separate schedule(s)  
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 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Gwendy Lykke

Mailing Address 20820 Bell Bluff Rd

City Gaithersburg State MD Zip Code 20879-1112

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

Name of Employer N/A Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 04 / 29 / 2009

Transaction ID: C6088672

Amount of Each Receipt this Period 50.00

**B.** Full Name (Last, First, Middle Initial)  
Claudia M. Lyon

Mailing Address 428 Hedgewood Dr

City Gallipolis State OH Zip Code 45631-1114

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

Name of Employer Holzer Clinic Inc. Occupation CRNA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 01 / 2009

Transaction ID: C6088945

Amount of Each Receipt this Period 50.00

**C.** Full Name (Last, First, Middle Initial)  
Deborah Lyons

Mailing Address 410 9th Street

City Del Mar State CA Zip Code 92014

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

Name of Employer Zarbrah, Inc. Occupation Restaurateur

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 08 / 2009

Transaction ID: C6088686

Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 125.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)

Deborah Lyons

Mailing Address 410 9th Street

City State Zip Code  
Del Mar CA 92014

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

Name of Employer Occupation  
Zarbrah, Inc Restaurateur

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 0 9

Transaction ID: C6088687

Amount of Each Receipt this Period  
35.00

**B.**

Full Name (Last, First, Middle Initial)

Genevieve MacKinnon

Mailing Address 826 Boulder Creek Lane

City State Zip Code  
Ashland OR 97520

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 2 / 2 0 0 9

Transaction ID: C6090641

Amount of Each Receipt this Period  
200.00

**C.**

Full Name (Last, First, Middle Initial)

Genevieve MacKinnon

Mailing Address 826 Boulder Creek Lane

City State Zip Code  
Ashland OR 97520

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 7 / 2 0 0 9

Transaction ID: C6090642

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ►

285.00

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

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

Use separate schedule(s)  
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 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
John R. Maclean  
Mailing Address 11 N Main St  
City Cleburne State TX Zip Code 76033-5543  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Maclean & Boulware Occupation Partner  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 04 / 30 / 2009  
Transaction ID: C6056472  
Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
Patricia Madrid  
Mailing Address 2219 Vista Larga Ave, NE  
City Albuquerque State NM Zip Code 87106  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 04 / 30 / 2009  
Transaction ID: C6056535  
Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Shahrokh Mafi  
Mailing Address 1824 Brannen Rd SE  
City Atlanta State GA Zip Code 30316-3610  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Student  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 375.00  
Date of Receipt 04 / 27 / 2009  
Transaction ID: C6089719  
Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1300.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s)  
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 11a    11b    11c    12  
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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Stephen Malouf

Mailing Address 3811 Turtle Creek Blvd.  
Suite 1600

City State Zip Code  
Dallas TX 75219

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

Name of Employer Self-Employed Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6056533

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
Phil Manke

Mailing Address W9230 State Road 21

City State Zip Code  
Wautoma WI 54982

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6067320

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Whitman F. Manley

Mailing Address 716 1st Street

City State Zip Code  
Woodland CA 95695

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

Name of Employer Remy, Thomas, Moose and Manley, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 2 / 2 0 0 9

**Transaction ID:** C6056370

Amount of Each Receipt this Period  
3000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5250.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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 11a    11b    11c    12  
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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Roberta Manning

Mailing Address 176 Dedham St

City State Zip Code  
Newton Hlds MA 02461-2118

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Boston College College Prof. Of History

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 0 9

**Transaction ID:** C6063568

Amount of Each Receipt this Period 60.00

**B.** Full Name (Last, First, Middle Initial)  
Maeva Marcus

Mailing Address 5600 Harwick Rd

City State Zip Code  
Bethesda MD 20816-2052

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Supreme Court Historical Society Historian

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6062077

Amount of Each Receipt this Period 300.00

**C.** Full Name (Last, First, Middle Initial)  
Frederic R Marschner

Mailing Address 100 Pringle Ave; Ste 150  
Suite 150

City State Zip Code  
Walnut Creek CA 94596

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Northwestern Mutual Financial Network Life, Disability & Long Term Care Ins.

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 0 1 / 2 0 0 9

**Transaction ID:** C6089829

Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... 410.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
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(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Norman A. Marshall

Mailing Address 20543 Debbie Ln

City State Zip Code  
Saratoga CA 95070-4827

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 0 9 / 2 0 0 9

**Transaction ID:** C6060170

Amount of Each Receipt this Period 116.00

**B.** Full Name (Last, First, Middle Initial)  
Carol S. Martin

Mailing Address 208 W Golf Pl

City State Zip Code  
Pagosa Springs CO 81147-9316

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 322.00

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 0 9

**Transaction ID:** C6067996

Amount of Each Receipt this Period 111.00

**C.** Full Name (Last, First, Middle Initial)  
Mathias Masem

Mailing Address 80 Grand Ave Ste 600

City State Zip Code  
Oakland CA 94612-3744

FEC ID number of contributing federal political committee. C

Name of Employer UCSF Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 2 0 / 2 0 0 9

**Transaction ID:** C6056360

Amount of Each Receipt this Period 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... 5227.00

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

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

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

FOR LINE NUMBER: PAGE 158 / 551  
(check only one)  
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 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Meigs Matheson  
Mailing Address 1914 Clemens Rd  
City Oakland State CA Zip Code 94602  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Unemployed  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 04 / 01 / 2009  
Transaction ID: C6090538  
Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
Andrew L. Maverick  
Mailing Address 82 Fremont Pl  
City Los Angeles State CA Zip Code 90005-3858  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 04 / 21 / 2009  
Transaction ID: C6070576  
Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Byron May  
Mailing Address PO Box 147  
City West Liberty State KY Zip Code 41472-0147  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00  
Date of Receipt 04 / 08 / 2009  
Transaction ID: C6065280  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1350.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Byron May

Mailing Address PO Box 147

City State Zip Code  
West Liberty KY 41472-0147

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6056817

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Miachel F. Mayer

Mailing Address 50 Popham Rd.  
Apt. 5B

City State Zip Code  
Scarsdale NY 10583

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
04 / 07 / 2009

**Transaction ID:** C6067811

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Miachel F. Mayer

Mailing Address 50 Popham Rd.  
Apt. 5B

City State Zip Code  
Scarsdale NY 10533

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6067812

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 400.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Elizabeth Mc Cormack

Mailing Address 870 United Nations Plz  
Apt. 8A

City State Zip Code  
New York NY 10017-1807

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

Name of Employer Occupation  
Laurance S Rockefeller Advisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
04 / 07 / 2009

**Transaction ID:** C6058986

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Joel W. McClure

Mailing Address 2510 Cresta de Ruta

City State Zip Code  
Eugene OR 97403

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
MM / DD / YYYY  
04 / 14 / 2009

**Transaction ID:** C6084331

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Leah McDonald

Mailing Address PO Box 1323

City State Zip Code  
Choteau MT 59422-1323

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6063980

Amount of Each Receipt this Period  
320.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **670.00**

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
George McElroy

Mailing Address 62 Pointe Park Place

City State Zip Code  
Grosse Pointe MI 48236

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 1 7 / 2 0 0 9

**Transaction ID:** C6066193

Amount of Each Receipt this Period  
600.00

**B.** Full Name (Last, First, Middle Initial)  
D. E. McGill

Mailing Address PO Box 619

City State Zip Code  
Bayfield CO 81122-0619

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 2 9 / 2 0 0 9

**Transaction ID:** C6090999

Amount of Each Receipt this Period  
75.00

**C.** Full Name (Last, First, Middle Initial)  
John H McGowen

Mailing Address 485 Waxflower Ln

City State Zip Code  
Fallbrook CA 92028-2448

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6057638

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **775.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Mary Anne McGuire-Hickey

Mailing Address 50 Mariposa St

City State Zip Code  
Brisbane CA 94005-1533

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

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6057723

Amount of Each Receipt this Period  
110.00

**B.**

Full Name (Last, First, Middle Initial)  
Elizabeth L. McKeever

Mailing Address 80 Margaretta Court

City State Zip Code  
Staten Island NY 10314

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

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 7 / 2 0 0 9

Transaction ID: C6086401

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
Mary Alice McLarty

Mailing Address 6407 Clubhouse Cir

City State Zip Code  
Dallas TX 75240-5444

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

Name of Employer Occupation  
Self-Employed Attorney

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 3 / 2 0 0 9

Transaction ID: C6056376

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1360.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
George McLaughlin

Mailing Address 3525 Turtle Creek Boulevard 14B  
14BC

City State Zip Code  
Dallas TX 75219

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

Name of Employer Occupation  
Best Merchant Partners Senior Advisor

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 9

Transaction ID: C6090212

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
Jill McNeil

Mailing Address 301 Islington Road

City State Zip Code  
Newton MA 02466

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

Name of Employer Occupation  
CSC Business Architect

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 640.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 4 / 2 0 0 9

Transaction ID: C6088967

Amount of Each Receipt this Period

160.00

**C.**

Full Name (Last, First, Middle Initial)  
Robert McWilliams

Mailing Address 22 Locust Dr

City State Zip Code  
Florissant MO 63031-8221

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

Name of Employer Occupation  
Lashey A Bren Pc Attorney

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 230.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 1 / 2 0 0 9

Transaction ID: C6078430

Amount of Each Receipt this Period

77.80

**SUBTOTAL** of Receipts This Page (optional) .....

337.80

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

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
McArthur Means

Mailing Address 753 W Bode Cir  
Apt 212

City Hoffman Estates State IL Zip Code 60169-2947

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 490.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 1 / 2 0 0 9

**Transaction ID:** C6090057

Amount of Each Receipt this Period  
60.00

**B.** Full Name (Last, First, Middle Initial)  
Christopher Meany

Mailing Address 350 Jackson St  
No 501

City San Francisco State CA Zip Code 94111-2348

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

Name of Employer Wilson, Meany, Sullivan Occupation Real Estate

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 0 / 2 0 0 9

**Transaction ID:** C6007451

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Roy J. Messelt

Mailing Address 13419 Van Buren St NE

City Ham Lake State MN Zip Code 55304-6959

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6061911

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1360.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Lawrence W. Miles

Mailing Address 3249 Clairidge Way

City Sacramento State CA Zip Code 95821

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

Name of Employer The Miles Law Firm Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 04 / 30 / 2009

Transaction ID: C6056437

Amount of Each Receipt this Period: 250.00

**B.**

Full Name (Last, First, Middle Initial)  
Margaret Miller

Mailing Address 3737 Atwell Ste 206

City Dallas State TX Zip Code 75209

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

Name of Employer N/A Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 04 / 30 / 2009

Transaction ID: C6056484

Amount of Each Receipt this Period: 500.00

**C.**

Full Name (Last, First, Middle Initial)  
Nancy C. Miller

Mailing Address 1782 11th Ave

City Sacramento State CA Zip Code 95818-4164

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

Name of Employer Miller Owen & Frost Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 04 / 30 / 2009

Transaction ID: C6056421

Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1750.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
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(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
William S. Miller

Mailing Address 50 Popham Rd.

City State Zip Code  
Scarsdale NY 10533

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 224.00

Date of Receipt  
MM / DD / YYYY  
04 / 28 / 2009

**Transaction ID:** C6079160

Amount of Each Receipt this Period  
112.00

**B.**

Full Name (Last, First, Middle Initial)  
Bernie Minsk

Mailing Address 7415 8th Ave. NW Apt. A

City State Zip Code  
Seattle WA 98117

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
04 / 13 / 2009

**Transaction ID:** C6060812

Amount of Each Receipt this Period  
200.00

**C.**

Full Name (Last, First, Middle Initial)  
Mark Monaldi

Mailing Address 3803 Hamilton Avenue

City State Zip Code  
Baltimore MD 21206

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

Name of Employer Penn-Mar Organization, Inc. Occupation Residential Assistant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
04 / 27 / 2009

**Transaction ID:** C6089438

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **332.00**

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

**SCHEDULE A (FEC Form 3X)  
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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Michael Moore

Mailing Address PO Box 1213

City State Zip Code  
Saratoga Springs NY 12866-0888

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6064090

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Donald E. Morris

Mailing Address 10624 S Eastern Ave # A201

City State Zip Code  
Henderson NV 89052-2982

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 28400.00

Date of Receipt  
MM / DD / YYYY  
04 / 17 / 2009

**Transaction ID:** C6007430

Amount of Each Receipt this Period  
23400.00

**C.** Full Name (Last, First, Middle Initial)  
Ronald Morrison

Mailing Address P.O. Box 14316

City State Zip Code  
San Francisco CA 94114

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
04 / 22 / 2009

**Transaction ID:** C6091305

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 24650.00

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

**SCHEDULE A (FEC Form 3X)  
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for each category of the  
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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Christopher Moscone  
Mailing Address 35 Laverne Avenue  
City Mill Valley State CA Zip Code 94941  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Moscone Public Affairs Occupation Executive  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 04 / 20 / 2009  
Transaction ID: C6056358  
Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
David Moyar  
Mailing Address 13415 Shaker Blvd Apt 10D2  
City Cleveland State OH Zip Code 44120-5617  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Mei Hotels Occupation Hotels  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 04 / 21 / 2009  
Transaction ID: C6069299  
Amount of Each Receipt this Period 300.00

**C.** Full Name (Last, First, Middle Initial)  
Diana Mozumder  
Mailing Address 23705 Mariner Dr Apt 182  
City Dana Point State CA Zip Code 92629  
FEC ID number of contributing federal political committee. **C**  
Name of Employer So Coast Med Ctr/PCR Kims-taff HR Occupation Registered Nurse  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 220.00  
Date of Receipt 04 / 22 / 2009  
Transaction ID: C6089496  
Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1350.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 169 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Diana Mozumder

Mailing Address 23705 Mariner Dr Apt 182

City Dana Point State CA Zip Code 92629

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

Name of Employer So Coast Med Ctr/PCR Kims-taff HR Occupation Registered Nurse

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00

Date of Receipt 04 / 27 / 2009  
Transaction ID: C6089497  
Amount of Each Receipt this Period 35.00

**B.** Full Name (Last, First, Middle Initial)  
Philip R. Munger

Mailing Address 40 Fifth Avenue #11C

City New York State NY Zip Code 10011-8843

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

Name of Employer Self-Employed Occupation Policy Analyst

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 30400.00

Date of Receipt 04 / 30 / 2009  
Transaction ID: C6056506  
Amount of Each Receipt this Period 1900.00

**C.** Full Name (Last, First, Middle Initial)  
Murray G. Murphey

Mailing Address 200 Rhyle Ln

City Bala Cynwyd State PA Zip Code 19004-2324

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 16 / 2009  
Transaction ID: C6068722  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2035.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 170 / 551  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Murray G. Murphey

Mailing Address 200 Rhyle Ln

City Bala Cynwyd State PA Zip Code 19004-2324

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 04 / 28 / 2009  
Transaction ID: C6062403  
Amount of Each Receipt this Period: 100.00

**B.**

Full Name (Last, First, Middle Initial)  
Murray G. Murphey

Mailing Address 200 Rhyle Ln

City Bala Cynwyd State PA Zip Code 19004-2324

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 04 / 13 / 2009  
Transaction ID: C6068723  
Amount of Each Receipt this Period: 100.00

**C.**

Full Name (Last, First, Middle Initial)  
Shakir Mustafa

Mailing Address PO BOX 450201

City Kissimmee State FL Zip Code 34745

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

Name of Employer Self-Employed Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt: 04 / 27 / 2009  
Transaction ID: C6088904  
Amount of Each Receipt this Period: 35.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 235.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 171 / 551  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Shakir Mustafa

Mailing Address PO BOX 450201

City State Zip Code  
Kissimmee FL 34745

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

Name of Employer Self-Employed Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2009

**Transaction ID:** C6088903

Amount of Each Receipt this Period  
20.00

**B.**

Full Name (Last, First, Middle Initial)  
Shakir Mustafa

Mailing Address PO BOX 450201

City State Zip Code  
Kissimmee FL 34745

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

Name of Employer Self-Employed Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
MM / DD / YYYY  
04 / 27 / 2009

**Transaction ID:** C6090301

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Michael H. Namadan

Mailing Address 143 Vinewood Dr

City State Zip Code  
Safety Harbor FL 34695-4688

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
04 / 23 / 2009

**Transaction ID:** C6078191

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **240.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 172 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)

Shirley Nash

Mailing Address P.O. Box 348

City State Zip Code  
Chester Springs PA 19425

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6074411

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Cynthia Nelson

Mailing Address 21262 E Saddlerock Lane

City State Zip Code  
Aurora CO 80016

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

Name of Employer Occupation  
Self-Employed Marketing Executive

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 0 9

Transaction ID: C6089171

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Rick Nemeroff

Mailing Address 9400 N. Central Expwy Suite 608

City State Zip Code  
Dallas TX 75231

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

Name of Employer Occupation  
DeLuca & Nemeroff Attorney

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6056512

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

5500.00

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

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 173 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Ben Neufeld

Mailing Address 2008 Linda Flora Dr

City State Zip Code  
Los Angeles CA 90077-1407

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	4	/	2	0	0	9

**Transaction ID:** C6062211

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Patricia H Noyes

Mailing Address 2014 Elk Ave

City State Zip Code  
Eugene OR 97403-1734

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	7	/	2	0	0	9

**Transaction ID:** C6058552

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Thomas J. O'Donnell

Mailing Address 10 West Kirke Street

City State Zip Code  
Chevy Chase MD 20815

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

Name of Employer Gephardt Group Occupation Lobbyist

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	9

**Transaction ID:** C6056391

Amount of Each Receipt this Period  
10000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **11500.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 174 / 551  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial) Dave Oldham		Date of Receipt MM / DD / YYYY 04 / 01 / 2009
Mailing Address 632 Grove Avenue Apartment 1		<b>Transaction ID:</b> C6090407
City Johnstown	State PA	Zip Code 15902
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Association for the Blind and Handicap	Occupation Sewing Machine Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

**B.**

Full Name (Last, First, Middle Initial) Dave Oldham		Date of Receipt MM / DD / YYYY 04 / 04 / 2009
Mailing Address 632 Grove Avenue Apartment 1		<b>Transaction ID:</b> C6090408
City Johnstown	State PA	Zip Code 15902
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer Association for the Blind and Handicap	Occupation Sewing Machine Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

**C.**

Full Name (Last, First, Middle Initial) Dave Oldham		Date of Receipt MM / DD / YYYY 04 / 17 / 2009
Mailing Address 632 Grove Avenue Apartment 1		<b>Transaction ID:</b> C6090409
City Johnstown	State PA	Zip Code 15902
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer Association for the Blind and Handicap	Occupation Sewing Machine Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	70.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 175 / 551  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Dave Oldham

Mailing Address 632 Grove Avenue  
Apartment 1

City Johnstown State PA Zip Code 15902

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

Name of Employer Association for the Blind and Handicap Occupation Sewing Machine Operator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 04 / 29 / 2009

Transaction ID: C6089309

Amount of Each Receipt this Period 35.00

**B.**

Full Name (Last, First, Middle Initial)  
Ruth Olds

Mailing Address 10501 Lagrima De Oro Rd NE  
Apt. 350

City Albuquerque State NM Zip Code 87111-3737

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 16 / 2009

Transaction ID: C6069561

Amount of Each Receipt this Period 250.00

**C.**

Full Name (Last, First, Middle Initial)  
Robert J. Oremus

Mailing Address 9510 S Kolmar Ave  
Apt. 108

City Oak Lawn State IL Zip Code 60453-7200

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

Name of Employer Prairie Material Sales In-c. Occupation Office Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt 04 / 21 / 2009

Transaction ID: C6071816

Amount of Each Receipt this Period 180.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 465.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 176 / 551  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Robert J. Oremus

Mailing Address 9510 S Kolmar Ave  
Apt. 108

City State Zip Code  
Oak Lawn IL 60453-7200

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

Name of Employer Occupation  
Prairie Material Sales In- Office Worker  
c.

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 295.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 2 / 2 0 0 9

Transaction ID: C6071815

Amount of Each Receipt this Period  
115.00

**B.**

Full Name (Last, First, Middle Initial)  
Charles Ortnr

Mailing Address 28 Paddington Rd

City State Zip Code  
Scarsdale NY 10583-2322

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

Name of Employer Occupation  
Proskauer Rosé LLP Attorney

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6056438

Amount of Each Receipt this Period  
2000.00

**C.**

Full Name (Last, First, Middle Initial)  
Irene P. Osborn

Mailing Address 61 Carroll St

City State Zip Code  
Bronx NY 10464-1463

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

Name of Employer Occupation  
Mount Sinai Hospital Physician

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6074324

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2315.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 177 / 551  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Mildred D. Owens

Mailing Address 3321 Greenmeade Rd

City State Zip Code  
Baltimore MD 21244-1137

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

Name of Employer Social Security Adm Occupation Program Analyst

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 316.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 8 / 2 0 0 9

Transaction ID: C6069599

Amount of Each Receipt this Period  
66.00

**B.**

Full Name (Last, First, Middle Initial)  
Mildred D. Owens

Mailing Address 3321 Greenmeade Rd

City State Zip Code  
Baltimore MD 21244-1137

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

Name of Employer Social Security Adm Occupation Program Analyst

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 316.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 9

Transaction ID: C6074889

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
Michael F. Ozaki

Mailing Address 6451 Sundance Cir

City State Zip Code  
Huntington Beach CA 92647-6546

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

Name of Employer Bristol Park Medical Group Occupation Doctor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 1 / 2 0 0 9

Transaction ID: C6088732

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **416.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 178 / 551  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Christopher Paci

Mailing Address 1172 Park Ave. Apt. 4C

City State Zip Code  
New York NY 10128

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

Name of Employer Occupation  
Dla Piper US Llp Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
04 / 23 / 2009

**Transaction ID:** C6078628

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
J Rock Palermo

Mailing Address 4603 Angelle Dr.

City State Zip Code  
Sulphur LA 70663

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6080303

Amount of Each Receipt this Period  
210.00

**C.**

Full Name (Last, First, Middle Initial)  
Adelaide P. Park

Mailing Address 513 Wyckoff Rd.

City State Zip Code  
Ithaca NY 14850

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

Name of Employer Occupation  
Pork Foundation Program Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
MM / DD / YYYY  
04 / 13 / 2009

**Transaction ID:** C6073139

Amount of Each Receipt this Period  
3000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3460.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 179 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Glenn F. Park

Date of Receipt  
MM / DD / YYYY  
04 / 17 / 2009

Mailing Address 222 Aloha Dr. #901  
Apt. 901

Transaction ID: C6058764

City Hon State HI Zip Code 96815

Amount of Each Receipt this Period  
25.00

FEC ID number of contributing federal political committee. C

Name of Employer State Of Hawaii Occupation Social Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

**B.**

Full Name (Last, First, Middle Initial)  
Ethel E. Parker

Date of Receipt  
MM / DD / YYYY  
04 / 19 / 2009

Mailing Address 48 Parker Rd

Transaction ID: C6062203

City Fort Shaw State MT Zip Code 59443-9400

Amount of Each Receipt this Period  
50.00

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
305.00

**C.**

Full Name (Last, First, Middle Initial)  
Ethel E. Parker

Date of Receipt  
MM / DD / YYYY  
04 / 21 / 2009

Mailing Address 48 Parker Rd

Transaction ID: C6062204

City Fort Shaw State MT Zip Code 59443-9400

Amount of Each Receipt this Period  
50.00

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
305.00

**SUBTOTAL** of Receipts This Page (optional) ..... 125.00

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

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

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

FOR LINE NUMBER: PAGE 180 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Scott Parven  
 Mailing Address 8817 Sleepy Hollow Lane  
 City Potomac State MD Zip Code 20854  
 Date of Receipt 04 / 30 / 2009  
**Transaction ID:** C6056523  
 Amount of Each Receipt this Period 1900.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Parven Pomper Strategies Occupation Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 30400.00

**B.** Full Name (Last, First, Middle Initial)  
Gloria Y. Paton  
 Mailing Address 31 Samantha Dr.  
 City Coram State NY Zip Code 11727  
 Date of Receipt 04 / 30 / 2009  
**Transaction ID:** C6061097  
 Amount of Each Receipt this Period 115.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer N/A Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 365.00

**C.** Full Name (Last, First, Middle Initial)  
Virginia Patterson  
 Mailing Address 203 Santa Rosa Ave  
 City Sausalito State CA Zip Code 94965-2036  
 Date of Receipt 04 / 10 / 2009  
**Transaction ID:** C6069156  
 Amount of Each Receipt this Period 200.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer N/A Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2215.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 181 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Virginia Patterson

Mailing Address 203 Santa Rosa Ave

City State Zip Code  
Sausalito CA 94965-2036

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 0 9

**Transaction ID:** C6057823

Amount of Each Receipt this Period 100.00

**B.**

Full Name (Last, First, Middle Initial)  
Margaret A. Patton

Mailing Address 807 SW Terrace Ave

City State Zip Code  
Topeka KS 66611-1218

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 248.00

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 0 9 / 2 0 0 9

**Transaction ID:** C6082629

Amount of Each Receipt this Period 66.00

**C.**

Full Name (Last, First, Middle Initial)  
Margaret A. Patton

Mailing Address 807 SW Terrace Ave

City State Zip Code  
Topeka KS 66611-1218

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 248.00

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6073762

Amount of Each Receipt this Period 66.00

**SUBTOTAL** of Receipts This Page (optional) ..... 232.00

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

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

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

FOR LINE NUMBER: PAGE 182 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Leonidas W. Payne

Mailing Address 284 York Ln.

City Washington State MO Zip Code 63090

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 16 / 2009

**Transaction ID: C6071906**

Amount of Each Receipt this Period 300.00

**B.** Full Name (Last, First, Middle Initial)  
Warren H. Pearse

Mailing Address 10450 Lottsford Rd. Apt. 5005

City Bowie State MD Zip Code 20721

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 04 / 20 / 2009

**Transaction ID: C6066537**

Amount of Each Receipt this Period 50.00

**C.** Full Name (Last, First, Middle Initial)  
Warren H. Pearse

Mailing Address 10450 Lottsford Rd. Apt. 5005

City Bowie State MD Zip Code 20721

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 04 / 30 / 2009

**Transaction ID: C6066538**

Amount of Each Receipt this Period 55.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 405.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 183 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial) Trudy Peltier		Date of Receipt MM / DD / YYYY 04 / 29 / 2009
Mailing Address 1928 Cambridge Dr.		<b>Transaction ID:</b> C6091581
City La Place	State LA	Zip Code 70068
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer N/A	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**B.**

Full Name (Last, First, Middle Initial) Richard Pelz		Date of Receipt MM / DD / YYYY 04 / 01 / 2009
Mailing Address 900 University St Apt 13P		<b>Transaction ID:</b> C6088930
City Seattle	State WA	Zip Code 98101-2778
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

**C.**

Full Name (Last, First, Middle Initial) Robert Pennoyer		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
Mailing Address 33 E 70th St		<b>Transaction ID:</b> C6058365
City New York	State NY	Zip Code 10021-4941
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Patterson Belknap Webb & Tyler	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1350.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 184 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
JaMel Perkins  
Mailing Address 3565 Washington St  
City San Francisco State CA Zip Code 94118-1848  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 04 / 20 / 2009  
Transaction ID: C6056359  
Amount of Each Receipt this Period 5000.00

**B.** Full Name (Last, First, Middle Initial)  
Guadalupe Perkis  
Mailing Address P.O. Box 445  
City San Antonio State FL Zip Code 33576  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 04 / 30 / 2009  
Transaction ID: C6056713  
Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
Gordon B. Peters  
Mailing Address 824 Hinman Ave Apt. 2N  
City Evanston State IL Zip Code 60202-5906  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 04 / 24 / 2009  
Transaction ID: C6068176  
Amount of Each Receipt this Period 150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5250.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 185 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Katharine L. Picard

Mailing Address 3707 Raymond St

City State Zip Code  
Chevy Chase MD 20815-4149

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

Name of Employer Occupation  
Johns Hopkins U Librarian

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
04 / 23 / 2009

**Transaction ID:** C6068037

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Albert Plourde

Mailing Address 54 Highland Ave  
Unit 26

City State Zip Code  
Tewksbury MA 01876-3447

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
MM / DD / YYYY  
04 / 07 / 2009

**Transaction ID:** C6083381

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Albert Plourde

Mailing Address 54 Highland Ave  
Unit 26

City State Zip Code  
Tewksbury MA 01876-3447

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
MM / DD / YYYY  
04 / 09 / 2009

**Transaction ID:** C6083380

Amount of Each Receipt this Period  
40.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **390.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 186 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Albert Plourde

Mailing Address 54 Highland Ave  
Unit 26

City State Zip Code  
Tewksbury MA 01876-3447

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 2 0 / 2 0 0 9

**Transaction ID:** C6078186

Amount of Each Receipt this Period 50.00

**B.**

Full Name (Last, First, Middle Initial)  
Albert Plourde

Mailing Address 54 Highland Ave  
Unit 26

City State Zip Code  
Tewksbury MA 01876-3447

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 2 0 / 2 0 0 9

**Transaction ID:** C6083379

Amount of Each Receipt this Period 50.00

**C.**

Full Name (Last, First, Middle Initial)  
Albert Plourde

Mailing Address 54 Highland Ave  
Unit 26

City State Zip Code  
Tewksbury MA 01876-3447

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6073547

Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... 150.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 187 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Edward Pollak

Mailing Address 111 Lynn Ave  
Apt. 810

City Ames State IA Zip Code 50014-7191

FEC ID number of contributing federal political committee. C

Name of Employer Iowa State Univ Occupation Professor

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt M M / D D / Y Y Y Y  
04 / 27 / 2009

**Transaction ID:** C6062624

Amount of Each Receipt this Period 450.00

**B.** Full Name (Last, First, Middle Initial)  
Kay K. Poyner

Mailing Address 11501 Bondurant Dr

City Richmond State VA Zip Code 23236-2474

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt M M / D D / Y Y Y Y  
04 / 09 / 2009

**Transaction ID:** C6082062

Amount of Each Receipt this Period 200.00

**C.** Full Name (Last, First, Middle Initial)  
Silas Prather

Mailing Address 1337 S 101St St  
Apt 121

City Omaha State NE Zip Code 68124-1095

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation Management Consultant

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt M M / D D / Y Y Y Y  
04 / 30 / 2009

**Transaction ID:** C6057265

Amount of Each Receipt this Period 55.00

**SUBTOTAL** of Receipts This Page (optional) ..... 705.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 188 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Carole Pratt

Mailing Address PO Box 64

City Philo State CA Zip Code 95466-0064

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 04 / 07 / 2009

**Transaction ID:** C6059850

Amount of Each Receipt this Period 150.00

**B.**

Full Name (Last, First, Middle Initial)  
Carole Pratt

Mailing Address PO Box 64

City Philo State CA Zip Code 95466-0064

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 04 / 30 / 2009

**Transaction ID:** C6064985

Amount of Each Receipt this Period 150.00

**C.**

Full Name (Last, First, Middle Initial)  
Melretta Pratt

Mailing Address 7030 NW 28th Ave

City Miami State FL Zip Code 33147-6762

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3600.00

Date of Receipt 04 / 21 / 2009

**Transaction ID:** C6065578

Amount of Each Receipt this Period 1200.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1500.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 189 / 551  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Rosemary Pritzker

Mailing Address 1578 Noe St.  
Apt 4W

City San Francisco State CA Zip Code 94131

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

Name of Employer Self-Employed Occupation Writer, Photographer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 22 / 2009

Transaction ID: C6090263

Amount of Each Receipt this Period 250.00

**B.**

Full Name (Last, First, Middle Initial)  
Howard E. Rachofsky

Mailing Address 8201 Preston Rd., Suite 400

City Dallas State TX Zip Code 75225

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

Name of Employer Dent Law Firm Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 30 / 2009

Transaction ID: C6056500

Amount of Each Receipt this Period 1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Bernard Raimo

Mailing Address 157 Kentucky Ave SE

City Washington State DC Zip Code 20003-1447

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

Name of Employer Dem Leader Us House Of Rep Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 30 / 2009

Transaction ID: C6082714

Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1750.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 190 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Karen Reibstein</p> <p>Mailing Address 942 Roscommon Rd</p> <p>City State Zip Code Bryn Mawr PA 19010-1843</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer N/A Occupation Homemaker</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">600.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 4 / 2 3 / 2 0 0 9</span></p> <p><b>Transaction ID:</b> C6068867</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">300.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Mary L. Riccobono</p> <p>Mailing Address 1807 Restful Dr</p> <p>City State Zip Code Bradenton FL 34207-4560</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer N/A Occupation Retired</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">285.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 4 / 2 8 / 2 0 0 9</span></p> <p><b>Transaction ID:</b> C6063553</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">110.00</span></p>
--	---

<p><b>C.</b> Full Name (Last, First, Middle Initial) Robert Richards</p> <p>Mailing Address 592 E Beaumont Rd</p> <p>City State Zip Code Columbus OH 43214-2272</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer N/A Occupation Retired</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 4 / 1 0 / 2 0 0 9</span></p> <p><b>Transaction ID:</b> C6082342</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">50.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">460.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

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

FOR LINE NUMBER: PAGE 191 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Jonathan Richman

Mailing Address 325 W End Ave  
Apt 5B

City State Zip Code  
New York NY 10023-8138

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

Name of Employer Occupation  
Debevoise & Plimpton Llp Attorney

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
04 / 20 / 2009

**Transaction ID:** C6062267

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Helena Riney

Mailing Address 7517 Swanson Ln

City State Zip Code  
Sarasota FL 34231-7918

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

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 230.00

Date of Receipt  
MM / DD / YYYY  
04 / 07 / 2009

**Transaction ID:** C6058454

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Stephen Robert

Mailing Address 667 Madison Ave

City State Zip Code  
New York NY 10065-8029

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

Name of Employer Occupation  
Renaissance Institutional Management Chairman & CEO

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 30400.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6007428

Amount of Each Receipt this Period  
30400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 30750.00

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

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

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

FOR LINE NUMBER: PAGE 192 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Owen W. Roberts

Mailing Address 4701 Fulton St NW

City Washington State DC Zip Code 20007-1024

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 04 / 15 / 2009  
Transaction ID: C6060298  
Amount of Each Receipt this Period: 250.00

**B.** Full Name (Last, First, Middle Initial)  
Elmer Robinson

Mailing Address 668 Adams Ave

City Los Banos State CA Zip Code 93635-4702

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 04 / 16 / 2009  
Transaction ID: C6082625  
Amount of Each Receipt this Period: 300.00

**C.** Full Name (Last, First, Middle Initial)  
Linda Rockwell

Mailing Address P.O. Box 728

City West Kingston State RI Zip Code 02892

FEC ID number of contributing federal political committee. **C**

Name of Employer City of St. Louis Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 04 / 30 / 2009  
Transaction ID: C6078828  
Amount of Each Receipt this Period: 150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 700.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 193 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)

Sharon Rodgers

Mailing Address 7273 Pam Ln

City State Zip Code  
Terrell TX 75161-8046

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Texas Health Resources Audit RN

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 222.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 4 / 2 0 0 9

Transaction ID: C6070592

Amount of Each Receipt this Period  
111.00

**B.**

Full Name (Last, First, Middle Initial)

Norma Rodriguez

Mailing Address 2101 W Summit Ave.

City State Zip Code  
San Antonio TX 78201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 315.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6057376

Amount of Each Receipt this Period  
200.00

**C.**

Full Name (Last, First, Middle Initial)

Debra M. Roepke

Mailing Address 616 Tivoli Psge

City State Zip Code  
Alexandria VA 22314-1900

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 209.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 1 / 2 0 0 9

Transaction ID: C6078389

Amount of Each Receipt this Period  
209.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

520.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 194 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Kenneth C. Rogers

Mailing Address 6202 Perthshire Ct

City State Zip Code  
Bethesda MD 20817-3348

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 1 / 2 0 0 9

Transaction ID: C6088997

Amount of Each Receipt this Period  
35.00

**B.**

Full Name (Last, First, Middle Initial)  
Kenneth C. Rogers

Mailing Address 6202 Perthshire Ct

City State Zip Code  
Bethesda MD 20817-3348

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 7 / 2 0 0 9

Transaction ID: C6088998

Amount of Each Receipt this Period  
25.00

**C.**

Full Name (Last, First, Middle Initial)  
Kenneth C. Rogers

Mailing Address 6202 Perthshire Ct

City State Zip Code  
Bethesda MD 20817-3348

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 2 / 2 0 0 9

Transaction ID: C6088999

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

110.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 195 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Antonio M. Romanucci  
Mailing Address 450 W Superior St  
City Chicago State IL Zip Code 60610  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Romanucci & Blandin Occupation Partner  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00  
Date of Receipt 04 / 29 / 2009  
Transaction ID: C6056431  
Amount of Each Receipt this Period 2500.00

**B.** Full Name (Last, First, Middle Initial)  
Jan E. Ronis  
Mailing Address 1100 Glorietta Blvd.  
City San Diego State CA Zip Code 92118  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 04 / 30 / 2009  
Transaction ID: C6085067  
Amount of Each Receipt this Period 250.00

**C.** Full Name (Last, First, Middle Initial)  
John L. Rosenfeld  
Mailing Address 2401 Arbutus Dr  
City Los Angeles State CA Zip Code 90049-1208  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 314.00  
Date of Receipt 04 / 01 / 2009  
Transaction ID: C6090045  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2850.00  
**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 196 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Karen B. Rosenstein

Mailing Address 17152 Village 17

City State Zip Code  
camarillo CA 93012

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 1 / 2 0 0 9

**Transaction ID:** C6090326

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Karen B. rosenstein

Mailing Address 17152 Village 17

City State Zip Code  
camarillo CA 93012

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 3 / 2 0 0 9

**Transaction ID:** C6090327

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Stephen B. Ross

Mailing Address 2084 Flamingo Dr

City State Zip Code  
Costa Mesa CA 92626-4722

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 5 / 2 0 0 9

**Transaction ID:** C6082677

Amount of Each Receipt this Period  
75.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **175.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 197 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial) Peter Rossi		Date of Receipt MM / DD / YYYY 04 / 28 / 2009
Mailing Address 34 Stagecoach Rd		<b>Transaction ID:</b> C6062684
City Amherst	State Zip Code MA 01002-3527	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Information Requested	Occupation Retired	Aggregate Year-to-Date ▼ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**B.**

Full Name (Last, First, Middle Initial) Richard L. Roth		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
Mailing Address 1220 26th St		<b>Transaction ID:</b> C6063018
City Boulder	State Zip Code CO 80302-6802	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer N/A	Occupation Retired	Aggregate Year-to-Date ▼ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**C.**

Full Name (Last, First, Middle Initial) Arlene Rowe		Date of Receipt MM / DD / YYYY 04 / 29 / 2009
Mailing Address 3521 Lake Oak Ridge Dr.		<b>Transaction ID:</b> C6090222
City Enterprise	State Zip Code AL 36330	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer Coldwell Banker Prestige	Occupation Realtor	Aggregate Year-to-Date ▼ 155.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>550.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 198 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Jack Rubinsohn

Mailing Address 3272 Highfield Dr

City State Zip Code  
Bethlehem PA 18020-1153

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
MM / DD / YYYY  
04 / 01 / 2009

**Transaction ID:** C6090093

Amount of Each Receipt this Period  
20.00

**B.**

Full Name (Last, First, Middle Initial)  
Jack Rubinsohn

Mailing Address 3272 Highfield Dr

City State Zip Code  
Bethlehem PA 18020-1153

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
MM / DD / YYYY  
04 / 28 / 2009

**Transaction ID:** C6090094

Amount of Each Receipt this Period  
50.00

**C.**

Full Name (Last, First, Middle Initial)  
Kay Ruma

Mailing Address 826 Reef Rd

City State Zip Code  
Vero Beach FL 32963-2921

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation N/A

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
04 / 29 / 2009

**Transaction ID:** C6089045

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 95.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 199 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Donald W. Runde

Mailing Address 26657 Humber St.

City State Zip Code  
Huntington Woods MI 48070

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 775.00

Date of Receipt  
MM / DD / YYYY  
04 / 28 / 2009

**Transaction ID:** C6078829

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Alton Russell

Mailing Address 3501 Renzel Blvd  
Apt 251

City State Zip Code  
Fort Worth TX 76116-6637

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
04 / 15 / 2009

**Transaction ID:** C6067923

Amount of Each Receipt this Period  
55.00

**C.**

Full Name (Last, First, Middle Initial)  
Arthur Sadin

Mailing Address 2207 Lakeway Dr

City State Zip Code  
Friendswood TX 77546-6179

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6056435

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5155.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 200 / 551  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial) Jeannette Safran		Date of Receipt MM / DD / YYYY 04 / 14 / 2009
Mailing Address 1200 N Adams Rd Unit 2		<b>Transaction ID:</b> C6070368
City Birmingham	State MI	Zip Code 48009-5567
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 120.00
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

**B.**

Full Name (Last, First, Middle Initial) Eric P. Salonen		Date of Receipt MM / DD / YYYY 04 / 10 / 2009
Mailing Address 1638 Hobart St NW		<b>Transaction ID:</b> C6061675
City Washington	State DC	Zip Code 20009-3705
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Stewart and Stewart	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

**C.**

Full Name (Last, First, Middle Initial) Robert D. Sanchez		Date of Receipt MM / DD / YYYY 04 / 10 / 2009
Mailing Address 14110 Tallow Point Ct		<b>Transaction ID:</b> C6075299
City Houston	State TX	Zip Code 77062-8047
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer Jacobs Engineering	Occupation Contracts Admin	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	395.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 201 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Robert D. Sanchez

Mailing Address 14110 Tallow Point Ct

City State Zip Code  
Houston TX 77062-8047

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Jacobs Engineering Contracts Admin

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 1 / 2 0 0 9

**Transaction ID:** C6083722

Amount of Each Receipt this Period  
40.00

**B.** Full Name (Last, First, Middle Initial)  
Susan Sandler

Mailing Address 553 Arkansas St.

City State Zip Code  
San Francisco CA 94107-2817

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Justice Matters Institute Policy Advocate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 15200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6056490

Amount of Each Receipt this Period  
15200.00

**C.** Full Name (Last, First, Middle Initial)  
Roger W. Sant

Mailing Address 2929 N St NW

City State Zip Code  
Washington DC 20007-3342

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
AES Corporation Founders

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6056517

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **20240.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 202 / 551  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Victoria P. Sant

Mailing Address 2929 N St NW

City Washington State DC Zip Code 20036-3433

FEC ID number of contributing federal political committee. **C**

Name of Employer Summit Foundation Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 04 / 30 / 2009  
**Transaction ID: C6056568**  
 Amount of Each Receipt this Period: 5000.00

**B.**

Full Name (Last, First, Middle Initial)  
Gaile B Sarma

Mailing Address 140 Autumn Hill Rd

City Princeton State NJ Zip Code 08540-2912

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 04 / 30 / 2009  
**Transaction ID: C6074962**  
 Amount of Each Receipt this Period: 200.00

**C.**

Full Name (Last, First, Middle Initial)  
Marjorie Satz

Mailing Address 5 Bayard Rd Apt 818

City Pittsburgh State PA Zip Code 15213-1907

FEC ID number of contributing federal political committee. **C**

Name of Employer Northern SW Community Mh/- Mr Ct. Occupation Social Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 04 / 30 / 2009  
**Transaction ID: C6074786**  
 Amount of Each Receipt this Period: 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5450.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 203 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Harold H. Saunders</p> <p>Mailing Address 2101 Lorraine Ave</p> <p>City State Zip Code Mc Lean VA 22101-5332</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Information Requested Occupation Information Requested</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">210.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 04 / 14 / 2009</p> <p><b>Transaction ID:</b> C6071122</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">210.00</span></p>
--	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) Lisa Savitt</p> <p>Mailing Address 5824 Bradley Blvd.</p> <p>City State Zip Code Bethesda MD 20814</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Self-Employed Occupation Scientist</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">205.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 04 / 28 / 2009</p> <p><b>Transaction ID:</b> C6074426</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">25.00</span></p>
--	--

<p><b>C.</b> Full Name (Last, First, Middle Initial) Richard A. Sayles</p> <p>Mailing Address 1201 Elm St Ste 4400</p> <p>City State Zip Code Dallas TX 75270-2107</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Sayles &amp; Lidji Occupation Information Requested</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">2000.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 04 / 30 / 2009</p> <p><b>Transaction ID:</b> C6056460</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">2000.00</span></p>
---	--

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">2235.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 204 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Juliette J Schick

Mailing Address 7077 Applewood Dr

City State Zip Code  
Madison WI 53719-4949

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Scilog Inc. Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6077647

Amount of Each Receipt this Period 125.00

**B.** Full Name (Last, First, Middle Initial)  
Alice L. Schonfeld

Mailing Address 2848 Avenida Valera

City State Zip Code  
Carlsbad CA 92009

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
United States Postal Service Letter Carrier

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY  
04 / 20 / 2009

**Transaction ID:** C6066895

Amount of Each Receipt this Period 200.00

**C.** Full Name (Last, First, Middle Initial)  
Alice S. Schulman

Mailing Address 5 Marsh Millet Ct.

City State Zip Code  
Spring TX 77380

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY  
04 / 10 / 2009

**Transaction ID:** C6073343

Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... 575.00

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 205 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Naoko Scott

Mailing Address 225 E 57th St

City State Zip Code  
New York NY 10022-2822

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 0 9

Transaction ID: C6058520

Amount of Each Receipt this Period  
240.00

**B.**

Full Name (Last, First, Middle Initial)  
Michael N. Searles

Mailing Address P.O. Box 464

City State Zip Code  
Waynesboro GA 30830

FEC ID number of contributing federal political committee. **C**

Name of Employer Augusta State Univ Occupation Professor

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 221.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 0 9

Transaction ID: C6078881

Amount of Each Receipt this Period  
111.00

**C.**

Full Name (Last, First, Middle Initial)  
Robert E Selleck

Mailing Address 7092 Sayre Dr

City State Zip Code  
Piedmont CA 94611-1429

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6063715

Amount of Each Receipt this Period  
80.00

**SUBTOTAL** of Receipts This Page (optional) ..... ►

431.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 206 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Lorenzo Semple

Mailing Address 1181 McClellan Dr.

City State Zip Code  
Los Angeles CA 90049

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
04 / 13 / 2009

**Transaction ID:** C6078888

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Marie L. Serra

Mailing Address 255 Evernia St. Apt. 1303

City State Zip Code  
West Palm Beach FL 33401

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
04 / 21 / 2009

**Transaction ID:** C6084895

Amount of Each Receipt this Period  
150.00

**C.**

Full Name (Last, First, Middle Initial)  
Suzanne G. Seton

Mailing Address 1960 Vallejo St Apt 2

City State Zip Code  
San Francisco CA 94123-4944

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
04 / 09 / 2009

**Transaction ID:** C6059735

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **300.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 207 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial) Suzanne G. Seton		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
Mailing Address 1960 Vallejo St Apt 2		<b>Transaction ID:</b> C6064790
City San Francisco	State CA	Zip Code 94123-4944
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 150.00
Name of Employer N/A	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

**B.**

Full Name (Last, First, Middle Initial) Muriel S. Sevens		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
Mailing Address 22215 144th Ave SE		<b>Transaction ID:</b> C6074188
City Kent	State WA	Zip Code 98042-3153
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

**C.**

Full Name (Last, First, Middle Initial) Muriel S. Sevens		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
Mailing Address 22215 144th Ave SE		<b>Transaction ID:</b> C6074189
City Kent	State WA	Zip Code 98042-3153
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 35.00
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>385.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 208 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Freema Shapiro</p> <p>Mailing Address 170 Brattle St</p> <p>City State Zip Code Cambridge MA 02138-3309</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer N/A Occupation Retired</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">400.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 4 / 2 7 / 2 0 0 9</span></p> <p><b>Transaction ID:</b> C6063134</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">100.00</span></p>
--	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) Irving E. Sheffel</p> <p>Mailing Address 1215 SW 29th Ter Apt 4</p> <p>City State Zip Code Topeka KS 66611-2192</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer N/A Occupation Retired</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">258.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 4 / 2 8 / 2 0 0 9</span></p> <p><b>Transaction ID:</b> C6077935</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">75.00</span></p>
--	--

<p><b>C.</b> Full Name (Last, First, Middle Initial) Louise Sherikar</p> <p>Mailing Address 27542 Halcon</p> <p>City State Zip Code Mission Viejo CA 92691</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Information Requested Occupation Information Requested</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 4 / 1 6 / 2 0 0 9</span></p> <p><b>Transaction ID:</b> C6084950</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">200.00</span></p>
--	---

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">375.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 209 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Clyde Shorey  
Mailing Address 3033 W Lane Kys NW  
City Washington State DC Zip Code 20007-3057  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 04 / 30 / 2009  
Transaction ID: C6059190  
Amount of Each Receipt this Period 500.00

**B.** Full Name (Last, First, Middle Initial)  
Charles Siegel  
Mailing Address 7426 Kenshire Ln  
City Dallas State TX Zip Code 75230-2408  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Walters & Kraus Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 25000.00  
Date of Receipt 04 / 30 / 2009  
Transaction ID: C6056476  
Amount of Each Receipt this Period 25000.00

**C.** Full Name (Last, First, Middle Initial)  
Paul S. Simmons  
Mailing Address 2514 Oakenshield Road  
City Davis State CA Zip Code 95616  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Somach, Simmons, & Dunn Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 04 / 27 / 2009  
Transaction ID: C6056405  
Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 26500.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 210 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Daniel A. Simon

Mailing Address 45 W 60th St  
Apt 15A

City State Zip Code  
New York NY 10023-7943

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 30400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 5 / 2 0 0 9

Transaction ID: C6056388

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)  
Daniel A. Simon

Mailing Address 45 W 60th St  
Apt 15A

City State Zip Code  
New York NY 10023-7943

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 30400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 5 / 2 0 0 9

Transaction ID: C6056390

Amount of Each Receipt this Period

20400.00

**C.**

Full Name (Last, First, Middle Initial)  
Peter Bromberg Simon

Mailing Address Hc 67 Box 1252

City State Zip Code  
Big Sur CA 93920

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
WBLLC Product Development Consultant

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 1 / 2 0 0 9

Transaction ID: C6090207

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

25450.00

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 211 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Peter Bromberg Simon

Mailing Address Hc 67 Box 1252

City Big Sur State CA Zip Code 93920

FEC ID number of contributing federal political committee. **C**

Name of Employer WBLLC Occupation Product Development Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt: 04 / 01 / 2009  
**Transaction ID: C6090208**  
Amount of Each Receipt this Period: 35.00

**B.**

Full Name (Last, First, Middle Initial)  
Peter Bromberg Simon

Mailing Address Hc 67 Box 1252

City Big Sur State CA Zip Code 93920

FEC ID number of contributing federal political committee. **C**

Name of Employer WBLLC Occupation Product Development Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt: 04 / 18 / 2009  
**Transaction ID: C6090209**  
Amount of Each Receipt this Period: 25.00

**C.**

Full Name (Last, First, Middle Initial)  
Peter Bromberg Simon

Mailing Address Hc 67 Box 1252

City Big Sur State CA Zip Code 93920

FEC ID number of contributing federal political committee. **C**

Name of Employer WBLLC Occupation Product Development Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt: 04 / 28 / 2009  
**Transaction ID: C6090210**  
Amount of Each Receipt this Period: 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 85.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 212 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Carol Noell Sims

Mailing Address 1252 Loch Tanna Loop

City State Zip Code  
Saint Johns FL 32259

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Baptist Health Physician Assistant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
MM / DD / YYYY  
04 / 01 / 2009

**Transaction ID:** C6090444

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Linda D. Sisson

Mailing Address 5525 Riverbend Dr.

City State Zip Code  
Knoxville TN 37919

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
04 / 09 / 2009

**Transaction ID:** C6061310

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Barry Skeist

Mailing Address 738 Douglas Dr

City State Zip Code  
Waverly NY 14892-9509

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Guthrie Clinic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6059983

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **450.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 213 / 551  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Edward A. Smeloff

Mailing Address 302 Jetty Drive

City Richmond State CA Zip Code 95804

FEC ID number of contributing federal political committee. **C**

Name of Employer SunPower Corporation Occupation Principal US Utilities

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 30 / 2009

Transaction ID: C6056418

Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Harlan Smith

Mailing Address 1706 Ryan Ave W

City Saint Paul State MN Zip Code 55113-5613

FEC ID number of contributing federal political committee. **C**

Name of Employer U of MN Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 13 / 2009

Transaction ID: C6077375

Amount of Each Receipt this Period 300.00

**C.** Full Name (Last, First, Middle Initial)  
Roberta Smith

Mailing Address 1818 Green Jays Ct.

City Corpus Christi State TX Zip Code 78418

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt 04 / 24 / 2009

Transaction ID: C6089163

Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1400.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 214 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Walter H. Sokel

Mailing Address 1650 Jackson St  
Apt 609

City State Zip Code  
San Francisco CA 94109-3031

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6057739

Amount of Each Receipt this Period  
160.00

**B.** Full Name (Last, First, Middle Initial)  
Martha Solano

Mailing Address 2848 US Highway 50

City State Zip Code  
Batavia OH 45103-9520

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
04 / 01 / 2009

**Transaction ID:** C6088689

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Martha Solano

Mailing Address 2848 US Highway 50

City State Zip Code  
Batavia OH 45103-9520

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
04 / 29 / 2009

**Transaction ID:** C6088690

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **310.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 215 / 551  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Arlene Solomon

Mailing Address 5501 E El Cedral St.

City State Zip Code  
Long Beach CA 90815

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 4 / 2 0 0 9

**Transaction ID:** C6084644

Amount of Each Receipt this Period  
450.00

**B.**

Full Name (Last, First, Middle Initial)  
Stuart L. Somach

Mailing Address 2657 Montgomery Way

City State Zip Code  
Sacramento CA 95818

FEC ID number of contributing federal political committee. **C**

Name of Employer Somach, Simmons & Dunn Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 7 / 2 0 0 9

**Transaction ID:** C6056404

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Christine Spagnoli

Mailing Address 1303 Hill St

City State Zip Code  
Santa Monica CA 90405-4723

FEC ID number of contributing federal political committee. **C**

Name of Employer Greene, Broillett, Taylor & Wheeler Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6056425

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2450.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 216 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Viola Spalding

Mailing Address 43641 Henson Rd.

City State Zip Code  
Hempstead TX 77445

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 900.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6073828

Amount of Each Receipt this Period  
900.00

**B.**

Full Name (Last, First, Middle Initial)  
Helen B. Spaulding

Mailing Address 220 Boylston St  
Apt 1003

City State Zip Code  
Boston MA 02116-3948

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 4 / 2 0 0 9

Transaction ID: C6068240

Amount of Each Receipt this Period  
450.00

**C.**

Full Name (Last, First, Middle Initial)  
Jackson Spievolgel

Mailing Address 424 W Fairmount Ave

City State Zip Code  
State College PA 16801-4612

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Writer Water Planner

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 235.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 4 / 2 0 0 9

Transaction ID: C6082382

Amount of Each Receipt this Period  
35.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

1385.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 217 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Jackson Spievolgel

Mailing Address 424 W Fairmount Ave

City State Zip Code  
State College PA 16801-4612

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Writer Water Planner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2009

**Transaction ID:** C6068447

Amount of Each Receipt this Period  
200.00

**B.**

Full Name (Last, First, Middle Initial)  
Jane Spragg

Mailing Address 56 N Spring St. Apt. 1

City State Zip Code  
Concord NH 03301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
04 / 09 / 2009

**Transaction ID:** C6060559

Amount of Each Receipt this Period  
200.00

**C.**

Full Name (Last, First, Middle Initial)  
D. Spriestersbach

Mailing Address 2 Longview Knl NE

City State Zip Code  
Iowa City IA 52240-9148

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
04 / 14 / 2009

**Transaction ID:** C6070854

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **600.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 218 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Mae Stadler

Mailing Address 241 E Bellevue Ave

City San Mateo State CA Zip Code 94401-2304

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 20 / 2009  
Transaction ID: C6071077  
Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
Barbara Stampfl

Mailing Address 2435 Jonila Avenue

City Lakeland State FL Zip Code 33803

FEC ID number of contributing federal political committee. **C**

Name of Employer Bartow Public Library Occupation Librarian

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 04 / 29 / 2009  
Transaction ID: C6089085  
Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Marc R. Stanley

Mailing Address 7403 Midbury Dr

City Dallas State TX Zip Code 75230-3205

FEC ID number of contributing federal political committee. **C**

Name of Employer Stanley Mandel & Iola Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 04 / 30 / 2009  
Transaction ID: C6056524  
Amount of Each Receipt this Period 25000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 25750.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 219 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Bruce Stark

Mailing Address 3770 Onyx St

City Eugene State OR Zip Code 97405-4332

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 29 / 2009

Transaction ID: C6057936

Amount of Each Receipt this Period 300.00

**B.** Full Name (Last, First, Middle Initial)  
Mittie S. Staton

Mailing Address 5215 Partridge St.

City Durham State NC Zip Code 27704

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt 04 / 28 / 2009

Transaction ID: C6058060

Amount of Each Receipt this Period 150.00

**C.** Full Name (Last, First, Middle Initial)  
Robert Stein

Mailing Address 235 Walker St Apt 258

City Lenox State MA Zip Code 01240-2749

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 13 / 2009

Transaction ID: C6061892

Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1450.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 220 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Carleton H. Steins

Mailing Address 339 Sea Oats Trl  
Unit 351

City State Zip Code  
Southrn Shore NC 27949-9003

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6063894

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Vera Stern

Mailing Address 2150 Fort Sanders St

City State Zip Code  
Henderson NV 89052

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 2 / 2 0 0 9

**Transaction ID:** C6090504

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Frances L. Stewart

Mailing Address 2400 N Bell Ave  
# 41

City State Zip Code  
Denton TX 76209-1913

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 6028.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 7 / 2 0 0 9

**Transaction ID:** C6071733

Amount of Each Receipt this Period  
4320.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4670.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 221 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
John R. Stewart

Mailing Address 480 E St.

City State Zip Code  
Salt Lake City UT 84103

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  
MM / DD / YYYY  
04 / 10 / 2009

**Transaction ID: C6083887**

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
John R. Stewart

Mailing Address 480 E St.

City State Zip Code  
Salt Lake City UT 84103

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID: C6083888**

Amount of Each Receipt this Period  
150.00

**C.**

Full Name (Last, First, Middle Initial)  
John D. Stoner

Mailing Address 106 Hollar Ave

City State Zip Code  
Shippensburg PA 17257-2134

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Veterinarian

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2009

**Transaction ID: C6083713**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **450.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 222 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Charlie Strange

Mailing Address 404 Lowry St

City State Zip Code  
Kerrville TX 78028-5237

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 17 / 2009  
**Transaction ID:** C6068282

Amount of Each Receipt this Period 350.00

**B.** Full Name (Last, First, Middle Initial)  
Patricia Sturdevant

Mailing Address 1836 8th Ave.

City State Zip Code  
Sacramento CA 95818

FEC ID number of contributing federal political committee. C

Name of Employer State of California Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 527.80

Date of Receipt 04 / 30 / 2009  
**Transaction ID:** C6056510

Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Daniel F Sullivan

Mailing Address 359 Church St

City State Zip Code  
San Francisco CA 94114-1718

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 10 / 2009  
**Transaction ID:** C6069946

Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1350.00

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 223 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Emanuel Suter

Mailing Address 250 Pantops Mountain Road, Apt. 30

City State Zip Code  
Charlottesville VA 22911

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
04 / 10 / 2009

**Transaction ID:** C6089525

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Emanuel Suter

Mailing Address 250 Pantops Mountain Road, Apt. 30

City State Zip Code  
Charlottesville VA 22911

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
04 / 22 / 2009

**Transaction ID:** C6089526

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Emanuel Suter

Mailing Address 250 Pantops Mountain Road, Apt. 30

City State Zip Code  
Charlottesville VA 22911

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
04 / 22 / 2009

**Transaction ID:** C6089527

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **300.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Emanuel Suter

Mailing Address 250 Pantops Mountain Road, Apt. 30

City State Zip Code  
Charlottesville VA 22911

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 04 / 27 / 2009  
Transaction ID: C6089528  
Amount of Each Receipt this Period: 100.00

**B.** Full Name (Last, First, Middle Initial)  
Alice Swan

Mailing Address 5451 Calle Pico

City State Zip Code  
Laguna Woods CA 92637

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 04 / 14 / 2009  
Transaction ID: C6084931  
Amount of Each Receipt this Period: 50.00

**C.** Full Name (Last, First, Middle Initial)  
Darian W. Swig

Mailing Address 377 Marina Blvd

City State Zip Code  
San Francisco CA 94123-1213

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: 04 / 30 / 2009  
Transaction ID: C6056518  
Amount of Each Receipt this Period: 10000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10150.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 225 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Babette Taghechian

Mailing Address 11 Clear Springs Ct

City State Zip Code  
Sugar Land TX 77479

FEC ID number of contributing federal political committee. **C**

Name of Employer Traders International      Occupation Manager

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      270.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	7	/	2	0	0	9

**Transaction ID:** C6089327

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Elizabeth Tanner

Mailing Address 501 E 85th St.

City State Zip Code  
New York NY 10028

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested      Occupation Information Requested

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      222.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	9

**Transaction ID:** C6067675

Amount of Each Receipt this Period  
111.00

**C.** Full Name (Last, First, Middle Initial)  
John Taroli

Mailing Address 34522 S Rivals Rd

City State Zip Code  
Wilmington IL 60481-9786

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      380.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	9

**Transaction ID:** C6064473

Amount of Each Receipt this Period  
230.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **441.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 226 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
John Taylor

Mailing Address 119 Lee Creek Rd.

City Fayetteville State TN Zip Code 37334

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Landscape Designer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 04 / 28 / 2009

Transaction ID: C6090223

Amount of Each Receipt this Period 250.00

**B.**

Full Name (Last, First, Middle Initial)  
Robert O. Taylor

Mailing Address 1112 Riviera Dr

City Norman State OK Zip Code 73072-7611

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 19 / 2009

Transaction ID: C6070940

Amount of Each Receipt this Period 60.00

**C.**

Full Name (Last, First, Middle Initial)  
Suzanne M. Taylor

Mailing Address 1024 Rio Cidade Way

City Sacramento State CA Zip Code 95831-4484

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 04 / 30 / 2009

Transaction ID: C6056429

Amount of Each Receipt this Period 2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2310.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 227 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Mark Thierry

Mailing Address 2305 Shady Cove Ct.

City Pearlland State TX Zip Code 77584

FEC ID number of contributing federal political committee. C

Name of Employer Joseph and Company Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt MM / DD / YYYY  
04 / 29 / 2009

**Transaction ID:** C6056478

Amount of Each Receipt this Period 30400.00

**B.**

Full Name (Last, First, Middle Initial)  
Dean Thomas

Mailing Address 1310 N Meade St  
Apt 14

City Arlington State VA Zip Code 22209-3708

FEC ID number of contributing federal political committee. C

Name of Employer National Beer Wholesalers Association Occupation Government Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 241.87

Date of Receipt MM / DD / YYYY  
04 / 08 / 2009

**Transaction ID:** C6007334

Amount of Each Receipt this Period 241.87

**C.**

Full Name (Last, First, Middle Initial)  
Tina A. Thomas

Mailing Address 2722 Coleman Way

City Sacramento State CA Zip Code 95818

FEC ID number of contributing federal political committee. C

Name of Employer Law offices of Tina Thomas Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY  
04 / 27 / 2009

**Transaction ID:** C6056412

Amount of Each Receipt this Period 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... 35641.87

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
John N. Thompson

Mailing Address R.R. #1 Box 225C

City State Zip Code  
Wellston OK 74881

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
560.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 3 / 2 0 0 9

**Transaction ID:** C6088649

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Kimberly Thompson

Mailing Address 6400 Christie Ave  
Apt 5220

City State Zip Code  
Emeryville CA 94608-1046

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Student Volunteer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 6 / 2 0 0 9

**Transaction ID:** C6058775

Amount of Each Receipt this Period  
210.00

**C.**

Full Name (Last, First, Middle Initial)  
Vivian N. Thompson

Mailing Address 1701 E 1500 Rd.

City State Zip Code  
Lawrence KS 66044

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 7 / 2 0 0 9

**Transaction ID:** C6066870

Amount of Each Receipt this Period  
130.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **440.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
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 (check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Donald Thomson

Mailing Address 941121 Hilihua Pl.

City State Zip Code  
Waipahu HI 96797

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 2 1 / 2 0 0 9

**Transaction ID:** C6078932

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Barbara Tilley

Mailing Address 3065 Vandiver Dr  
R.R. 7

City State Zip Code  
Marietta GA 30066

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 1 0 / 2 0 0 9

**Transaction ID:** C6063117

Amount of Each Receipt this Period  
750.00

**C.** Full Name (Last, First, Middle Initial)  
Barbara Tilley

Mailing Address 3065 Vandiver Dr  
R.R. 7

City State Zip Code  
Marietta GA 30066

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 1 5 / 2 0 0 9

**Transaction ID:** C6058998

Amount of Each Receipt this Period  
750.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1600.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 230 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Miles Tilly

Mailing Address 2300 East Valley Parkway  
SPC 116

City Escondido State CA Zip Code 92027

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Disabled

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt: 04 / 03 / 2009  
**Transaction ID: C6089381**  
 Amount of Each Receipt this Period: 35.00

**B.** Full Name (Last, First, Middle Initial)  
Terry W. Tilson

Mailing Address 8631 Buena Tierra Pl

City Buena Park State CA Zip Code 90621-1003

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 04 / 08 / 2009  
**Transaction ID: C6071361**  
 Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
Roy Titterton

Mailing Address 885 Heritage Hills

City Somers State NY Zip Code 10589

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 04 / 22 / 2009  
**Transaction ID: C6089174**  
 Amount of Each Receipt this Period: 2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2635.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 231 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial) Mary Tjosvold		Date of Receipt MM / DD / YYYY 04 / 29 / 2009
Mailing Address 1555 118th Ln NW		<b>Transaction ID:</b> C6089690
City Coon Rapids	State MN	Zip Code 55448-7579
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Mary T. Inc.	Occupation Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

**B.**

Full Name (Last, First, Middle Initial) Alex Toledo		Date of Receipt MM / DD / YYYY 04 / 30 / 2009
Mailing Address 2907 Barcelona Rd SW		<b>Transaction ID:</b> C6057504
City Albuquerque	State NM	Zip Code 87105-5549
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Bernalillo Co. Parks & Rec	Occupation Laborer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

**C.**

Full Name (Last, First, Middle Initial) Martha G. Tolles		Date of Receipt MM / DD / YYYY 04 / 04 / 2009
Mailing Address 860 Oxford Rd		<b>Transaction ID:</b> C6091208
City San Marino	State CA	Zip Code 91108-1214
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self-Employed	Occupation Author	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	225.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Tomas M. Torres

Mailing Address 13510 White Oak Landing Blvd

City State Zip Code  
Houston TX 77065-3124

FEC ID number of contributing federal political committee. **C**

Name of Employer Corporate Staffing Occupation CPA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6073818

Amount of Each Receipt this Period  
600.00

**B.** Full Name (Last, First, Middle Initial)  
Eligio Rivera Trinidad

Mailing Address 1128 N Heliotrope Dr

City State Zip Code  
Los Angeles CA 90029

FEC ID number of contributing federal political committee. **C**

Name of Employer CSA International Occupation Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
04 / 24 / 2009

**Transaction ID:** C6090366

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Marian Trotter

Mailing Address 250 Pantops Mountain Rd  
Apt 13

City State Zip Code  
Charlottesville VA 22911-8600

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
04 / 27 / 2009

**Transaction ID:** C6065758

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1150.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 233 / 551  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
William Tschappat

Mailing Address 1301 W Broadway St.

City State Zip Code  
Mt Pleasant MI 48858

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
US Dept of Labor Safety Inspector

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6066117

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Richard Updegraff

Mailing Address P.O. Box 308

City State Zip Code  
Pleasant Hill TN 38578

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 3 / 2 0 0 9

**Transaction ID:** C6072613

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
Laszlo K Urban

Mailing Address 7108 Ridgewood Ave

City State Zip Code  
Chevy Chase MD 20815-5148

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Catholic University of America Professor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 0 9

**Transaction ID:** C6070240

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **700.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 234 / 551  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Howard Vandervliet  
Mailing Address 117 Glendale Rd.  
City State Zip Code  
Park Ridge NJ 07656  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00  
Date of Receipt 04 / 30 / 2009  
Transaction ID: C6058173  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
Rayburn Velk  
Mailing Address Hc 30  
City State Zip Code  
Havre MT 59501-9801  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed Occupation Farmer/Rancher  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 04 / 30 / 2009  
Transaction ID: C6078419  
Amount of Each Receipt this Period 300.00

**C.** Full Name (Last, First, Middle Initial)  
Jerald L. Venger  
Mailing Address 4910 Capitol Ave.  
City State Zip Code  
Omaha NE 68132  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Omaha Temporary Svc Occupation Driver  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 650.00  
Date of Receipt 04 / 30 / 2009  
Transaction ID: C6078916  
Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 650.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 235 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)

Hans Von Briesen

Mailing Address 208 Sereno Dr

City State Zip Code  
Santa Fe NM 87501-1536

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	0	9

Transaction ID: C6089878

Amount of Each Receipt this Period  
20.00

**B.**

Full Name (Last, First, Middle Initial)

Jerome Walker

Mailing Address 343 Hertford Cir

City State Zip Code  
Decatur GA 30030-1031

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Neurology & Headache Specialist Neurologist

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	0	9

Transaction ID: C6060102

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)

Scott Walter

Mailing Address 1705 Millwright Ct.

City State Zip Code  
Raleigh NC 27614

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	0	9

Transaction ID: C6090168

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

**370.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 236 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Helen Wardeberg  
 Mailing Address 5250 Vernon Ave. S Apt. 603  
 City State Zip Code  
 Minneapolis MN 55436  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 1 3 / 2 0 0 9  
**Transaction ID:** C6073129  
 Amount of Each Receipt this Period  
 105.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Information Requested Occupation Information Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

**B.** Full Name (Last, First, Middle Initial)  
Todd Warnock  
 Mailing Address 889 Sheridan Rd.  
 City State Zip Code  
 Winnetka IL 60093  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 0 9 / 2 0 0 9  
**Transaction ID:** C6084205  
 Amount of Each Receipt this Period  
 100.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Information Requested Occupation Information Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

**C.** Full Name (Last, First, Middle Initial)  
Todd Warnock  
 Mailing Address 889 Sheridan Rd.  
 City State Zip Code  
 Winnetka IL 60093  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 2 4 / 2 0 0 9  
**Transaction ID:** C6084206  
 Amount of Each Receipt this Period  
 100.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Information Requested Occupation Information Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 305.00  
**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 237 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Casey Wasserman

Mailing Address 12100 Olympic Blvd.  
Suite 400

City State Zip Code  
Los Angeles CA 90064

FEC ID number of contributing federal political committee. **C**

Name of Employer Wasserman Media Group, LLC      Occupation Chairman & CEO

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6056488

Amount of Each Receipt this Period  
30400.00

**B.** Full Name (Last, First, Middle Initial)  
Edith Wasserman

Mailing Address 10100 Santa Monica Blvd.  
Ste 1300

City State Zip Code  
Los Angeles CA 90067

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A      Occupation Retired

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6056489

Amount of Each Receipt this Period  
30400.00

**C.** Full Name (Last, First, Middle Initial)  
C. Andrew Waters

Mailing Address 3219 McKinney Ave

City State Zip Code  
Dallas TX 75204-2472

FEC ID number of contributing federal political committee. **C**

Name of Employer Waters & Kraus      Occupation Attorney

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2009

**Transaction ID:** C6056479

Amount of Each Receipt this Period  
30400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **91200.00**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 238 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Louis Watson</p> <p>Mailing Address 1708 Ferndale Cir</p> <p>City State Zip Code <b>West Sacramento CA 95691-4036</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer N/A Occupation Retired</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">400.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">04 / 14 / 2009</span></p> <p><b>Transaction ID: C6058983</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">200.00</span></p>
--	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) Eric Wedel</p> <p>Mailing Address 1023 Tulane Dr</p> <p>City State Zip Code <b>Mountain View CA 94040-3651</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Bluearc Occupation Sw Eng</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">275.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">04 / 26 / 2009</span></p> <p><b>Transaction ID: C6089886</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">50.00</span></p>
--	--

<p><b>C.</b> Full Name (Last, First, Middle Initial) Alex. Weilenmann</p> <p>Mailing Address 307 S. Dithridge Street, Apt. 509</p> <p>City State Zip Code <b>Pittsburgh PA 15213</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer N/A Occupation Retired</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">400.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">04 / 27 / 2009</span></p> <p><b>Transaction ID: C6089232</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">150.00</span></p>
--	---

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">400.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 239 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)

Jon Weintraub

Mailing Address 3219 Morrison St NW

City State Zip Code  
Washington DC 20015-1636

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self-Employed Consultant

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6068976

Amount of Each Receipt this Period  
200.00

**B.**

Full Name (Last, First, Middle Initial)

Carl Weisbrod

Mailing Address 11551 Forest Central Dr  
Ste 300

City State Zip Code  
Dallas TX 75243-3924

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Morgan & Weisbrod Attorney

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6056471

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)

Les F. Weisbrod

Mailing Address 9900 Preston Rd

City State Zip Code  
Dallas TX 75230-5046

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Weisbrod & Weisbrod Attorney

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 30400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6056469

Amount of Each Receipt this Period  
30400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

31600.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 240 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Robert J. Weiss

Mailing Address 10 Cromwell Dr

City Orono State ME Zip Code 04473-3639

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 04 / 10 / 2009

Transaction ID: C6059058

Amount of Each Receipt this Period: 500.00

**B.** Full Name (Last, First, Middle Initial)  
Fred Weitz

Mailing Address 400 Locust St Suite 830

City Des Moines State IA Zip Code 50309

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 04 / 29 / 2009

Transaction ID: C6056433

Amount of Each Receipt this Period: 2500.00

**C.** Full Name (Last, First, Middle Initial)  
Stevenson Weitz

Mailing Address 2101 Connecticut Ave. NW Apt. 32

City Washington State DC Zip Code 20008

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 04 / 10 / 2009

Transaction ID: C6066598

Amount of Each Receipt this Period: 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3250.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 241 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Nick Weitzel

Mailing Address 4823 Sussex Drive

City San Diego State CA Zip Code 92116

FEC ID number of contributing federal political committee. **C**

Name of Employer Scripps Health Occupation RN

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 1 3 / 2 0 0 9

**Transaction ID:** C6071921

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Sandy Wendte

Mailing Address 3855 Evergreen Ave.

City Ketchikan State AK Zip Code 99901

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 222.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 2 8 / 2 0 0 9

**Transaction ID:** C6075802

Amount of Each Receipt this Period  
111.00

**C.** Full Name (Last, First, Middle Initial)  
Eric Karl Wepsic

Mailing Address 255 W 84th St Apt 7C

City New York State NY Zip Code 10024-4336

FEC ID number of contributing federal political committee. **C**

Name of Employer D.E. Shaw & Co. Occupation Executive

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6056474

Amount of Each Receipt this Period  
30400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **30561.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 242 / 551  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial) Eula West		Date of Receipt MM / DD / YYYY 04 / 21 / 2009
Mailing Address 7 Avenida Vista Grande # 234		<b>Transaction ID:</b> C6077563
City Santa Fe	State NM	Zip Code 87508-9198
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**B.**

Full Name (Last, First, Middle Initial) Eula West		Date of Receipt MM / DD / YYYY 04 / 22 / 2009
Mailing Address 7 Avenida Vista Grande # 234		<b>Transaction ID:</b> C6077562
City Santa Fe	State NM	Zip Code 87508-9198
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**C.**

Full Name (Last, First, Middle Initial) Gloria Westfall		Date of Receipt MM / DD / YYYY 04 / 20 / 2009
Mailing Address 800 Bell Trace Cir Apt 326		<b>Transaction ID:</b> C6071736
City Bloomington	State IN	Zip Code 47408-4403
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 450.00
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	600.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 243 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
William P. Wewer

Mailing Address 1731 W Medical Center Dr  
Apt. 372

City Anaheim State CA Zip Code 92801-1837

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 8 / 2 0 0 9

**Transaction ID:** C6083007

Amount of Each Receipt this Period  
40.00

**B.**

Full Name (Last, First, Middle Initial)  
William P. Wewer

Mailing Address 1731 W Medical Center Dr  
Apt. 372

City Anaheim State CA Zip Code 92801-1837

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 0 9

**Transaction ID:** C6064362

Amount of Each Receipt this Period  
25.00

**C.**

Full Name (Last, First, Middle Initial)  
Madelin M. Wexler

Mailing Address 1754 N Saint Michaels Ct

City Chicago State IL Zip Code 60614-5616

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 281.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 2 / 2 0 0 9

**Transaction ID:** C6082773

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **90.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 244 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Madelin M. Wexler

Mailing Address 1754 N Saint Michaels Ct

City State Zip Code  
Chicago IL 60614-5616

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 281.00

Date of Receipt  
MM / DD / YYYY  
04 / 29 / 2009

**Transaction ID:** C6077683

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Booker T. White

Mailing Address 8142 Lurline Ave

City State Zip Code  
Winnetka CA 91306-1731

FEC ID number of contributing federal political committee. **C**

Name of Employer BTW Productions Inc Occupation Musician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
04 / 07 / 2009

**Transaction ID:** C6091212

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Harrison White

Mailing Address 205 Garrett Rd # A

City State Zip Code  
Windsor NY 13865-1606

FEC ID number of contributing federal political committee. **C**

Name of Employer Bearsch Compéau Knudson Architects & E Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
04 / 01 / 2009

**Transaction ID:** C6090829

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **375.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 245 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Harrison White

Mailing Address 205 Garrett Rd  
# A

City Windsor State NY Zip Code 13865-1606

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Bearsch Compéau Knudson Manager  
Architects & E

Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 7 / 2 0 0 9

Transaction ID: C6090830

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
Nancy G. Whitney

Mailing Address 26 Night Heron Drive

City Stony Brook State NY Zip Code 11790-1108

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SUNY Stony Brook Professor

Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 4 / 2 0 0 9

Transaction ID: C6082614

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Alonzo B. Wickers

Mailing Address 8766 Lookout Mountain Ave

City Los Angeles State CA Zip Code 90046-1859

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Davis Wright Tremaine Attorney

Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 9 / 2 0 0 9

Transaction ID: C6075231

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 246 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Carol Wieckowski Dreyer  
Mailing Address 7030 Grant Ave

City State Zip Code  
Carmichael CA 95608

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Duncan, Ball & Evans Attorney

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6056423

Amount of Each Receipt this Period  
1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Paul Wiita  
Mailing Address 139 Random Rd

City State Zip Code  
Princeton NJ 08540-4145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Georgia State Univ Professor

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 6 / 2 0 0 9

Transaction ID: C6077571

Amount of Each Receipt this Period  
50.00

**C.**

Full Name (Last, First, Middle Initial)  
J. McDonald Williams  
Mailing Address 4715 Wildwood Rd

City State Zip Code  
Dallas TX 75209-1929

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6056457

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

2050.00

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 247 / 551  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Lucia M. Williams

Mailing Address 409 S Pine St.

City Spartanburg State SC Zip Code 29302

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 04 / 09 / 2009

Transaction ID: C6076411

Amount of Each Receipt this Period: 300.00

**B.** Full Name (Last, First, Middle Initial)  
Sheila Williams

Mailing Address 3935 Canterbury Dr

City Saint Louis State MO Zip Code 63121-2501

FEC ID number of contributing federal political committee. **C**

Name of Employer Normandy School District Occupation Educator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 04 / 28 / 2009

Transaction ID: C6077656

Amount of Each Receipt this Period: 25.00

**C.** Full Name (Last, First, Middle Initial)  
David P. Willis

Mailing Address 25 Central Park West Apt. 14-S

City New York State NY Zip Code 10023

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 04 / 28 / 2009

Transaction ID: C6089125

Amount of Each Receipt this Period: 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **425.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 248 / 551  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Janet T. Wilson  
Mailing Address 10695 N Lung Ln  
City State Zip Code  
Syracuse IN 46567-9626  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 450.00  
Date of Receipt 04 / 23 / 2009  
Transaction ID: C6065666  
Amount of Each Receipt this Period 450.00

**B.** Full Name (Last, First, Middle Initial)  
Nancy Wilson  
Mailing Address 3300 Darby Rd Apt 5203  
City State Zip Code  
Haverford PA 19041-7706  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 04 / 30 / 2009  
Transaction ID: C6058686  
Amount of Each Receipt this Period 250.00

**C.** Full Name (Last, First, Middle Initial)  
Roger V. Wilson  
Mailing Address 8622 Oak Level Church Rd  
City State Zip Code  
Stokesdale NC 27357-9229  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed Occupation Farmer  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 04 / 07 / 2009  
Transaction ID: C6064478  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 800.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 249 / 551

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Jerene J. Winocour

Mailing Address 2307 Lower Port Caddo Rd

City State Zip Code  
Marshall TX 75672-2231

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 527.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 0 9

Transaction ID: C6083246

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
Jerene J. Winocour

Mailing Address 2307 Lower Port Caddo Rd

City State Zip Code  
Marshall TX 75672-2231

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 527.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 3 / 2 0 0 9

Transaction ID: C6083247

Amount of Each Receipt this Period

327.00

**C.**

Full Name (Last, First, Middle Initial)  
Jonathan Wittwer

Mailing Address 1927 Smith Grade

City State Zip Code  
Santa Cruz CA 95060-9758

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Wittwer & Parkin, LLP Attorney

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 420.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 6 / 2 0 0 9

Transaction ID: C6088665

Amount of Each Receipt this Period

140.00

**SUBTOTAL** of Receipts This Page (optional) .....

667.00

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 250 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)

Jonathan Wolff

Mailing Address 531 Fairfield Dr.

City State Zip Code  
Louisville KY 40206

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	0	9

Transaction ID: C6078672

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)

Marian J. Woodson

Mailing Address 300 E Rich St  
Apt 816

City State Zip Code  
Columbus OH 43215-5236

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 272.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	0	9

Transaction ID: C6083103

Amount of Each Receipt this Period  
15.00

**C.**

Full Name (Last, First, Middle Initial)

Marian J. Woodson

Mailing Address 300 E Rich St  
Apt 816

City State Zip Code  
Columbus OH 43215-5236

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 272.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	0		2	0	0	9

Transaction ID: C6083100

Amount of Each Receipt this Period  
29.00

**SUBTOTAL** of Receipts This Page (optional) ..... ►

294.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 251 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Marian J. Woodson

Mailing Address 300 E Rich St  
Apt 816

City Columbus State OH Zip Code 43215-5236

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 272.00

Date of Receipt 04 / 10 / 2009  
Transaction ID: C6083101  
Amount of Each Receipt this Period 25.00

**B.** Full Name (Last, First, Middle Initial)  
Marian J. Woodson

Mailing Address 300 E Rich St  
Apt 816

City Columbus State OH Zip Code 43215-5236

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 272.00

Date of Receipt 04 / 10 / 2009  
Transaction ID: C6083102  
Amount of Each Receipt this Period 15.00

**C.** Full Name (Last, First, Middle Initial)  
Marian J. Woodson

Mailing Address 300 E Rich St  
Apt 816

City Columbus State OH Zip Code 43215-5236

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 272.00

Date of Receipt 04 / 28 / 2009  
Transaction ID: C6075049  
Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 65.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 252 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Marian J. Woodson

Mailing Address 300 E Rich St  
Apt 816

City Columbus State OH Zip Code 43215-5236

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 272.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6073494

Amount of Each Receipt this Period  
55.00

**B.** Full Name (Last, First, Middle Initial)  
Marian J. Woodson

Mailing Address 300 E Rich St  
Apt 816

City Columbus State OH Zip Code 43215-5236

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 272.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6073495

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Cecily Young

Mailing Address 4126 Marcasel Ave.

City Los Angeles State CA Zip Code 90066

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Architect

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6084488

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **130.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 253 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Michael Young

Mailing Address 145 Clinton St

City State Zip Code  
Brooklyn NY 11201-4616

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation  
Self-Employed Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 8 / 2 0 0 9

**Transaction ID:** C6089042

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Wei Young

Mailing Address 5978 Greenridge Rd

City State Zip Code  
Castro Valley CA 94552-1818

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
The Youngs Association Scientist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6061981

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Laverne Youngquist

Mailing Address 4003 29th Ave

City State Zip Code  
Rock Island IL 61201-5816

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 1 / 2 0 0 9

**Transaction ID:** C6070021

Amount of Each Receipt this Period  
55.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **455.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 254 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Robert R. Younkin

Mailing Address 2001 120th Pl. SE Apt. 3101

City State Zip Code  
Everett WA 98208

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 209.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 9 / 2 0 0 9

Transaction ID: C6086248

Amount of Each Receipt this Period

209.00

**B.**

Full Name (Last, First, Middle Initial)  
Martha Ann Yows

Mailing Address 200 Yows Ln

City State Zip Code  
Gatesville TX 76528-3414

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 4 / 2 0 0 9

Transaction ID: C6059545

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
Martha Ann Yows

Mailing Address 200 Yows Ln

City State Zip Code  
Gatesville TX 76528-3414

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 2 / 2 0 0 9

Transaction ID: C6070544

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

409.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 255 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
John J. Yuknavage  
Mailing Address 47 Ann St.  
City Pottsville State PA Zip Code 17901  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 04 / 03 / 2009  
Transaction ID: C6090257  
Amount of Each Receipt this Period 50.00

**B.** Full Name (Last, First, Middle Initial)  
John J. Yuknavage  
Mailing Address 47 Ann St.  
City Pottsville State PA Zip Code 00001-7901  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 04 / 29 / 2009  
Transaction ID: C6090258  
Amount of Each Receipt this Period 50.00

**C.** Full Name (Last, First, Middle Initial)  
Michael Zoretich  
Mailing Address 818 Eagle Pkwy  
City Brownsburg State IN Zip Code 46112-9777  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 04 / 30 / 2009  
Transaction ID: C6063359  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 200.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 256 / 551  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Barry Zucker

Mailing Address 98 Lookout Rd

City State Zip Code  
Mountain Lakes NJ 07046-1206

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
JB Hanaver Co Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 1 7 / 2 0 0 9

**Transaction ID:** C6059245

Amount of Each Receipt this Period 220.00

**B.**

Full Name (Last, First, Middle Initial)  
Gary True

Mailing Address 1 Timber Bluff Ct.

City State Zip Code  
Glen Carbon IL 62034

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Hepler Broom Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 2 0 / 2 0 0 9

**Transaction ID:** C6065995

Amount of Each Receipt this Period 200.00

**C.**

Full Name (Last, First, Middle Initial)  
Nancy True

Mailing Address PO Box 1092

City State Zip Code  
Penney Farms FL 32079-1092

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6078190

Amount of Each Receipt this Period 160.00

**SUBTOTAL** of Receipts This Page (optional) ..... 580.00

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 257 / 551  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Shakopee Mdewakanton Sioux Community

Mailing Address 2330 Sioux Trl NW

City State Zip Code  
Prior Lake MN 55372-9077

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	5	/	2	0	0	9

**Transaction ID:** C6007431

Amount of Each Receipt this Period  
15000.00

**B.** Full Name (Last, First, Middle Initial)  
Mille Lacs Band of Ojibwe

Mailing Address 43408 Oodena Dr

City State Zip Code  
Onamia MN 56359-2236

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	5	/	2	0	0	9

**Transaction ID:** C6007433

Amount of Each Receipt this Period  
15000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<b>30000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<b>1196020.48</b>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 258 / 551  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
CA Nurses Assoc./ National Nurses Organizing PAC

Mailing Address 555 Capitol Mall  
Ste 1425

City State Zip Code  
Sacramento CA 95814

FEC ID number of contributing federal political committee. **C** C00360438

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 8 / 2 0 0 9

**Transaction ID:** C6056396

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Surewest Communications PAC

Mailing Address 455 Capitol Mall, Ste 801

City State Zip Code  
Sacramento CA 95814

FEC ID number of contributing federal political committee. **C** C00372789

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 4 / 2 0 0 9

**Transaction ID:** C6007347

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Sempra Energy Employees PAC

Mailing Address 101 Ash St  
# HQ15B

City State Zip Code  
San Diego CA 92101-3017

FEC ID number of contributing federal political committee. **C** C00008748

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 4 / 2 0 0 9

**Transaction ID:** C6007358

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **11000.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 259 / 551  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
PG&E Corporation Energy Political Action Committee

Mailing Address 77 Beale Street  
PO Box 770000B29H

City San Francisco State CA Zip Code 94177-0001

FEC ID number of contributing federal political committee. **C** C00177469

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 3 / 2 0 0 9

**Transaction ID:** C6056377

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Power PAC of Edison Electric Institute

Mailing Address 701 Pennsylvania Ave NW

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00095869

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6056450

Amount of Each Receipt this Period  
15000.00

**C.** Full Name (Last, First, Middle Initial)  
American Society of Anesthesiologists Inc. PAC (ASAPAC)

Mailing Address 1101 Vermont Avenue, NW  
Sutie 606

City Washignton State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 7 / 2 0 0 9

**Transaction ID:** C6056395

Amount of Each Receipt this Period  
12500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 32500.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 260 / 551  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
College of American Pathologists PAC

Mailing Address 1350 I Street NW  
Suite 590

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00274944

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt: 04 / 22 / 2009  
**Transaction ID:** C6056365  
Amount of Each Receipt this Period: 15000.00

**B.** Full Name (Last, First, Middle Initial)  
Genzyme Corporation PAC

Mailing Address 1850 K Street

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00393736

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 04 / 30 / 2009  
**Transaction ID:** C6056451  
Amount of Each Receipt this Period: 5000.00

**C.** Full Name (Last, First, Middle Initial)  
The Society of Thoracic Surgeons PAC

Mailing Address 1025 Connecticut Ave NW  
Suite 1104

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00325936

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 04 / 30 / 2009  
**Transaction ID:** C6056430  
Amount of Each Receipt this Period: 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 25000.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 261 / 551  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
American College of Cardiology

Mailing Address 2400 N Street NW

City Washington State DC Zip Code 20037

FEC ID number of contributing federal political committee. **C** C00375360

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6056446

Amount of Each Receipt this Period  
15000.00

**B.**

Full Name (Last, First, Middle Initial)  
Bryan Cave, LLP PAC

Mailing Address 700 13th St NW  
Ste 500

City Washington State DC Zip Code 20005-3963

FEC ID number of contributing federal political committee. **C** C00332643

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6056537

Amount of Each Receipt this Period  
5000.00

**C.**

Full Name (Last, First, Middle Initial)  
American Academy of Family Physicians PAC

Mailing Address 2023 Massachusetts Ave NW

City Washington State DC Zip Code 20036-1011

FEC ID number of contributing federal political committee. **C** C00411553

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 3 / 2 0 0 9

**Transaction ID:** C6056378

Amount of Each Receipt this Period  
15000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **35000.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 262 / 551  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
American Association of Neurological Surgeons PAC  
Mailing Address 5550 Meadowbrook Court

City State Zip Code  
Rolling Meadows IL 60008

FEC ID number of contributing federal political committee. **C** C00413955

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 0 9

Transaction ID: C6056406

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)  
Foundation Coal PAC  
Mailing Address 429 B North Weber Road  
#253

City State Zip Code  
Romeoville IL 60446

FEC ID number of contributing federal political committee. **C** C00348524

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6056493

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)  
Society for Vascular Surgery PAC  
Mailing Address 633 North Clair Street  
24th Floor

City State Zip Code  
Chicago IL 60611

FEC ID number of contributing federal political committee. **C** C00381459

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 0 9

Transaction ID: C6056398

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

11000.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 263 / 551

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
American Association of Clinical Urologists - American Urological Assoc. PAC

Mailing Address 1111 N Plaza Dr  
Ste 550

City State Zip Code  
Schaumburg IL 60173-4946

FEC ID number of contributing federal political committee. **C** C00273003

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C6056494

Amount of Each Receipt this Period

10000.00

**B.**

Full Name (Last, First, Middle Initial)  
National Thoroughbred Racing Association PAC

Mailing Address 2525 Harrodsburg Road

City State Zip Code  
Lexington KY 40504

FEC ID number of contributing federal political committee. **C** C00360008

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 1 / 2 0 0 9

Transaction ID: C6056357

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)  
National Grid USA PAC

Mailing Address 25 Research Dr

City State Zip Code  
Westborough MA 01582-0001

FEC ID number of contributing federal political committee. **C** C00048702

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 0 9

Transaction ID: C6056407

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ►

17500.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 264 / 551  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
American Podiatric Medical Association PAC

Mailing Address 9312 Old Georgetown Rd

City State Zip Code  
Bethesda MD 20814-1621

FEC ID number of contributing federal political committee. **C** C00008839

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 2 / 2 0 0 9

**Transaction ID:** C6056363

Amount of Each Receipt this Period  
5000.00

**B.**

Full Name (Last, First, Middle Initial)  
UnitedHealth Group Inc. Political Fund

Mailing Address 900 Breb Rd. East  
MN008-W212

City State Zip Code  
Minnetonka MN 55343

FEC ID number of contributing federal political committee. **C** C00274431

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 8 / 2 0 0 9

**Transaction ID:** C6056394

Amount of Each Receipt this Period  
5000.00

**C.**

Full Name (Last, First, Middle Initial)  
JOE-PAC Jobs, Opportunities & Education PAC

Mailing Address 84-54 Grand Ave

City State Zip Code  
Elmhurst NY 11373

FEC ID number of contributing federal political committee. **C** C00362384

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Special

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 0 / 2 0 0 9

**Transaction ID:** C6007432

Amount of Each Receipt this Period  
2500.00

**[MEMO ITEM]**  
Earmarked for Scott Murphy  
for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► **10000.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 265 / 551  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Cruise Lines International Association PAC

Mailing Address 2111 Wilson Blvd No. 800

City State Zip Code  
Arlington VA 22201

FEC ID number of contributing federal political committee. **C** C00432393

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 2 2 / 2 0 0 9

**Transaction ID:** C6056366

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
American College of Radiology PAC

Mailing Address 1891 Preston White Dr

City State Zip Code  
Reston VA 20191-4375

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 2 8 / 2 0 0 9

**Transaction ID:** C6056400

Amount of Each Receipt this Period  
7500.00

**C.** Full Name (Last, First, Middle Initial)  
American College of Radiology PAC

Mailing Address 1891 Preston White Dr

City State Zip Code  
Reston VA 20191-4375

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 2 8 / 2 0 0 9

**Transaction ID:** C6056401

Amount of Each Receipt this Period  
7500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **17000.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 266 / 551  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
American Psychiatric Association PAC

Mailing Address 1000 Wilson Blvd  
Ste 1825

City Arlington State VA Zip Code 22209-3924

FEC ID number of contributing federal political committee. **C** C00373696

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 04 / 28 / 2009  
**Transaction ID:** C6056402  
Amount of Each Receipt this Period: 5000.00

**B.** Full Name (Last, First, Middle Initial)  
National Association of Chain Drug Stores PAC

Mailing Address 413 N Lee St

City Alexandria State VA Zip Code 22314-2301

FEC ID number of contributing federal political committee. **C** C00022368

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: 04 / 27 / 2009  
**Transaction ID:** C6056397  
Amount of Each Receipt this Period: 10000.00

**C.** Full Name (Last, First, Middle Initial)  
American Federation of Teachers Committee on Political Education

Mailing Address 555 New Jersey Ave NW

City Washington State DC Zip Code 20001-2029

FEC ID number of contributing federal political committee. **C** C00028860

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Special

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt: 04 / 15 / 2009  
**Transaction ID:** C6007445  
Amount of Each Receipt this Period: 5000.00

**[MEMO ITEM]**  
Earmarked for Scott Murphy  
for Congress

**SUBTOTAL** of Receipts This Page (optional) ..... ► 15000.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 267 / 551  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
American Federation of Teachers Committee on Political Education

Mailing Address 555 New Jersey Ave NW

City Washington State DC Zip Code 20001-2029

FEC ID number of contributing federal political committee. C C00028860

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) Special

Aggregate Year-to-Date 15000.00

Date of Receipt 04 / 15 / 2009

**Transaction ID:** C6007444

Amount of Each Receipt this Period 5000.00

**[MEMO ITEM]**  
Earmarked for New York Vi-  
ctory Protection Fund

**B.** Full Name (Last, First, Middle Initial)  
Taking the Hill PAC

Mailing Address 499 S Capitol St SW  
Ste 404

City Washington State DC Zip Code 20003-4004

FEC ID number of contributing federal political committee. C C00448019

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) Special

Aggregate Year-to-Date 0.00

Date of Receipt 04 / 14 / 2009

**Transaction ID:** C6007442

Amount of Each Receipt this Period 1000.00

**[MEMO ITEM]**  
Earmarked for New York Vi-  
ctory Protection Fund

**C.** Full Name (Last, First, Middle Initial)  
New Democrat Coalition PAC

Mailing Address 607 14th St NW  
Ste 800

City Washington State DC Zip Code 20005-2005

FEC ID number of contributing federal political committee. C C00409730

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) Special

Aggregate Year-to-Date 0.00

Date of Receipt 04 / 13 / 2009

**Transaction ID:** C6007443

Amount of Each Receipt this Period 5000.00

**[MEMO ITEM]**  
Earmarked for New York Vi-  
ctory Protection Fund

**SUBTOTAL** of Receipts This Page (optional) 0.00

**TOTAL** This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 268 / 551
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial) Friends of Charlie Wilson		Date of Receipt MM / DD / YYYY 04 / 03 / 2009
Mailing Address 252 W. Main Street P.O. Box 61		<b>Transaction ID:</b> C6007332
City Saint Clairsville	State OH	Zip Code 43950
FEC ID number of contributing federal political committee. <b>C</b> C00412015		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

**B.**

Full Name (Last, First, Middle Initial) Majority PAC		Date of Receipt MM / DD / YYYY 04 / 20 / 2009
Mailing Address 551 Main St. Suite 120		<b>Transaction ID:</b> C6007459
City Johnstown	State PA	Zip Code 15901
FEC ID number of contributing federal political committee. <b>C</b> C00426023		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	10000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	184000.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 269 / 551  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Citizens for Eleanor Holmes Norton

Mailing Address 2201 Wisconsin Ave NW  
Ste 320

City Washington State DC Zip Code 20007-4105

FEC ID number of contributing federal political committee. **C** C00244335

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 37500.00

Date of Receipt: 04 / 02 / 2009  
**Transaction ID:** C6007328  
Amount of Each Receipt this Period: 18750.00

Unlimited Transfer from Principal Campaign Cmte.

**B.** Full Name (Last, First, Middle Initial)  
Braley for Congress

Mailing Address PO Box 390

City Waterloo State IA Zip Code 50704-0390

FEC ID number of contributing federal political committee. **C** C00409441

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 100000.00

Date of Receipt: 04 / 02 / 2009  
**Transaction ID:** C6007325  
Amount of Each Receipt this Period: 25000.00

Unlimited Transfer from Principal Campaign Cmte.

**C.** Full Name (Last, First, Middle Initial)  
Cleaver for Congress

Mailing Address PO Box 411872

City Kansas City State MO Zip Code 64141-1872

FEC ID number of contributing federal political committee. **C** C00395848

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 50000.00

Date of Receipt: 04 / 02 / 2009  
**Transaction ID:** C6007326  
Amount of Each Receipt this Period: 50000.00

Unlimited Transfer from Principal Campaign Cmte.

**SUBTOTAL** of Receipts This Page (optional) ..... ► 93750.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 270 / 551  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Mike McIntyre for Congress

Mailing Address 3780 Berkley Ln

City Lumberton State NC Zip Code 28360-9002

FEC ID number of contributing federal political committee. **C** C00306829

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 20455.00

Date of Receipt: 04 / 02 / 2009  
**Transaction ID: C6007331**  
Amount of Each Receipt this Period: 20455.00

Unlimited Transfer from Principal Campaign Cmte.

**B.** Full Name (Last, First, Middle Initial)  
Pallone for Congress

Mailing Address P.O. Box 3176

City Long Branch State NJ Zip Code 07740-3176

FEC ID number of contributing federal political committee. **C** C00226928

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 50000.00

Date of Receipt: 04 / 06 / 2009  
**Transaction ID: C6007329**  
Amount of Each Receipt this Period: 50000.00

Unlimited Transfer from Principal Campaign Cmte.

**C.** Full Name (Last, First, Middle Initial)  
Inslee for Congress

Mailing Address PO Box 33027

City Seattle State WA Zip Code 98133-0027

FEC ID number of contributing federal political committee. **C** C00337436

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 36364.00

Date of Receipt: 04 / 06 / 2009  
**Transaction ID: C6007330**  
Amount of Each Receipt this Period: 9091.00

Unlimited Transfer from Principal Campaign Cmte.

**SUBTOTAL** of Receipts This Page (optional) ..... ► 79546.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 271 / 551  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Higgins for Congress  
Mailing Address PO Box 28

City State Zip Code  
Buffalo NY 14220-0028

FEC ID number of contributing federal political committee. **C** C00401034

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
30000.00

Date of Receipt  
MM / DD / YYYY  
04 / 07 / 2009

**Transaction ID:** C6007327

Amount of Each Receipt this Period  
30000.00

Unlimited Transfer from Principal Campaign Cmte.

**B.** Full Name (Last, First, Middle Initial)  
Friends of Jim Oberstar  
Mailing Address 1017 8th St NE

City State Zip Code  
Washington DC 20002-3620

FEC ID number of contributing federal political committee. **C** C00187419

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  
MM / DD / YYYY  
04 / 13 / 2009

**Transaction ID:** C6007338

Amount of Each Receipt this Period  
25000.00

Unlimited Transfer from Principal Campaign Cmte.

**C.** Full Name (Last, First, Middle Initial)  
Friends of Jim Oberstar  
Mailing Address 1017 8th St NE

City State Zip Code  
Washington DC 20002-3620

FEC ID number of contributing federal political committee. **C** C00187419

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  
MM / DD / YYYY  
04 / 13 / 2009

**Transaction ID:** C6007339

Amount of Each Receipt this Period  
25000.00

Unlimited Transfer from Principal Campaign Cmte.

**SUBTOTAL** of Receipts This Page (optional) ..... ► **80000.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 272 / 551  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Napolitano for Congress

Mailing Address 555 Capitol Mall  
Suite 1425

City State Zip Code  
Sacramento CA 95814

FEC ID number of contributing federal political committee. **C** C00334706

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	4	/	2	0	0	9

**Transaction ID:** C6007337

Amount of Each Receipt this Period  
50000.00

Unlimited Transfer from Principal Campaign Cmte.

**B.** Full Name (Last, First, Middle Initial)  
Committee to Re-Elect Henry Hank Johnson

Mailing Address 6440 Old Hillandale Drive  
Suite 262

City State Zip Code  
Lithonia GA 30058

FEC ID number of contributing federal political committee. **C** C00418293

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	6	/	2	0	0	9

**Transaction ID:** C6007390

Amount of Each Receipt this Period  
12000.00

Unlimited Transfer from Principal Campaign Cmte.

**C.** Full Name (Last, First, Middle Initial)  
Delahunt for Congress

Mailing Address 500 Victory Rd

City State Zip Code  
Quincy MA 02171-3139

FEC ID number of contributing federal political committee. **C** C00268938

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	6	/	2	0	0	9

**Transaction ID:** C6007438

Amount of Each Receipt this Period  
25000.00

Unlimited Transfer from Principal Campaign Cmte.

**SUBTOTAL** of Receipts This Page (optional) ..... ► **87000.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 273 / 551

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)

Boucher for Congress Committee

Mailing Address PO Box 2000

City State Zip Code  
Abingdon VA 24212-2000

FEC ID number of contributing federal political committee. **C** C00178418

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 6 / 2 0 0 9

Transaction ID: C6007436

Amount of Each Receipt this Period

25000.00

Unlimited Transfer from  
Principal Campaign Cmte.

**B.**

Full Name (Last, First, Middle Initial)

Friends of Jane Harman

Mailing Address 777 S. Figueroa St  
Suite 4050

City State Zip Code  
Los Angeles CA 90017

FEC ID number of contributing federal political committee. **C** C00255141

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
30000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 0 / 2 0 0 9

Transaction ID: C6007446

Amount of Each Receipt this Period

30000.00

Unlimited Transfer from  
Principal Campaign Cmte.

**C.**

Full Name (Last, First, Middle Initial)

Dutch Roppersberger for Congress

Mailing Address 22 West Padonia Raod  
Suite 307

City State Zip Code  
Timonium MD 21093

FEC ID number of contributing federal political committee. **C** C00376673

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
36364.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 0 / 2 0 0 9

Transaction ID: C6007447

Amount of Each Receipt this Period

9091.00

Unlimited Transfer from  
Principal Campaign Cmte.

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

64091.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 274 / 551  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16

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 Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Murtha for Congress Committee

Mailing Address 551 Main St  
Ste 120

City Johnstown State PA Zip Code 15901-2032

FEC ID number of contributing federal political committee. **C** C00019075

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 7500.00

Date of Receipt: 04 / 20 / 2009  
**Transaction ID:** C6007458  
Amount of Each Receipt this Period: 7500.00  
Unlimited Transfer from Principal Campaign Cmte.

**B.** Full Name (Last, First, Middle Initial)  
Danny Davis for Congress

Mailing Address PO Box 51267

City Chicago State IL Zip Code 60651-0267

FEC ID number of contributing federal political committee. **C** C00172619

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 50000.00

Date of Receipt: 04 / 21 / 2009  
**Transaction ID:** C6056355  
Amount of Each Receipt this Period: 50000.00  
Unlimited Transfer from Principal Campaign Cmte.

**C.** Full Name (Last, First, Middle Initial)  
Kind for Congress Committee

Mailing Address 205 5th Avenue South  
Suite 428

City La Crosse State WI Zip Code 54601

FEC ID number of contributing federal political committee. **C** C00312017

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 25000.00

Date of Receipt: 04 / 21 / 2009  
**Transaction ID:** C6056356  
Amount of Each Receipt this Period: 25000.00  
Unlimited Transfer from Principal Campaign Cmte.

**SUBTOTAL** of Receipts This Page (optional) ..... ► 82500.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 275 / 551  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Committee To Elect Chris Murphy

Mailing Address PO Box 127

City State Zip Code  
Cheshire CT 06410-0127

FEC ID number of contributing federal political committee. **C** C00411660

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 2 / 2 0 0 9

**Transaction ID:** C6056362

Amount of Each Receipt this Period  
25000.00

Unlimited Transfer from  
Principal Campaign Cmte.

**B.** Full Name (Last, First, Middle Initial)  
Visclosky for Congress Committee

Mailing Address PO Box 10003

City State Zip Code  
Merrillville IN 46411-0003

FEC ID number of contributing federal political committee. **C** C00166504

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
30000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 4 / 2 0 0 9

**Transaction ID:** C6056382

Amount of Each Receipt this Period  
30000.00

Unlimited Transfer from  
Principal Campaign Cmte.

**C.** Full Name (Last, First, Middle Initial)  
Anna Eshoo for Congress

Mailing Address 555 Capitol Mall  
Ste 1425

City State Zip Code  
Sacramento CA 95814-4602

FEC ID number of contributing federal political committee. **C** C00258475

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
75000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 7 / 2 0 0 9

**Transaction ID:** C6056384

Amount of Each Receipt this Period  
25000.00

Unlimited Transfer from  
Principal Campaign Cmte.

**SUBTOTAL** of Receipts This Page (optional) ..... ► **80000.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 276 / 551  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Costello For Congress Committee

Mailing Address PO Box 8250

City State Zip Code  
Belleville IL 62222-8250

FEC ID number of contributing federal political committee. **C** C00238444

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	7	/	2	0	0	9

**Transaction ID:** C6056389

Amount of Each Receipt this Period  
25000.00

Unlimited Transfer from Principal Campaign Cmte.

**B.** Full Name (Last, First, Middle Initial)  
Donna Edwards for Congress

Mailing Address P.O. Box 441153

City State Zip Code  
Ft Washington MD 20749

FEC ID number of contributing federal political committee. **C** C00422964

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
20000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	9	/	2	0	0	9

**Transaction ID:** C6056408

Amount of Each Receipt this Period  
20000.00

Unlimited Transfer from Principal Campaign Cmte.

**C.** Full Name (Last, First, Middle Initial)  
Pierluisi 2008 Inc.

Mailing Address PMB 232  
1353 Road 19

City State Zip Code  
Guaynabo PR 00966

FEC ID number of contributing federal political committee. **C** C00435636

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
23040.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	9	/	2	0	0	9

**Transaction ID:** C6056409

Amount of Each Receipt this Period  
5995.00

Unlimited Transfer from Principal Campaign Cmte.

**SUBTOTAL** of Receipts This Page (optional) ..... ► **50995.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 277 / 551  
 (check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Susan Davis for Congress

Mailing Address C/O 144 West D Street

City State Zip Code  
Encinitas CA 92024

FEC ID number of contributing federal political committee. **C** C00344671

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
18750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6056439

Amount of Each Receipt this Period  
18750.00

Unlimited Transfer from Principal Campaign Cmte.

**B.** Full Name (Last, First, Middle Initial)  
Niki Tsongas Committee

Mailing Address PO Box 1454

City State Zip Code  
Lowell MA 01853

FEC ID number of contributing federal political committee. **C** C00433136

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6056495

Amount of Each Receipt this Period  
5000.00

Unlimited Transfer from Principal Campaign Cmte.

**C.** Full Name (Last, First, Middle Initial)  
Norm Dicks for Congress

Mailing Address PO Box 1663

City State Zip Code  
Tacoma WA 98401-1663

FEC ID number of contributing federal political committee. **C** C00037606

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
45455.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID:** C6056448

Amount of Each Receipt this Period  
11364.00

Unlimited Transfer from Principal Campaign Cmte.

**SUBTOTAL** of Receipts This Page (optional) ..... ► **35114.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 278 / 551  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Friends For Jim McDermott  
Mailing Address PO Box 21786  
City Seattle State WA Zip Code 98111-3786  
FEC ID number of contributing federal political committee. **C** C00223073  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 20000.00  
Date of Receipt 04 / 30 / 2009  
Transaction ID: C6056442  
Amount of Each Receipt this Period 10000.00  
Unlimited Transfer from Principal Campaign Cmte.

**B.** Full Name (Last, First, Middle Initial)  
American List Counsel, Inc.  
Mailing Address P.O. Box 32189  
City Hartford State CT Zip Code 06150-2189  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 69850.90  
Date of Receipt 04 / 09 / 2009  
Transaction ID: SA17-862898  
Amount of Each Receipt this Period 6.11  
Generic Cmte. List Rental  
This payment reflects the usual and normal charge for rental of list(s).

**C.** Full Name (Last, First, Middle Initial)  
American List Counsel, Inc.  
Mailing Address P.O. Box 32189  
City Hartford State CT Zip Code 06150-2189  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 69850.90  
Date of Receipt 04 / 09 / 2009  
Transaction ID: SA17-862897  
Amount of Each Receipt this Period 4423.24  
Generic Cmte. List Rental  
This payment reflects the usual and normal charge for rental of list(s).

**SUBTOTAL** of Receipts This Page (optional) ..... ► 14429.35  
**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 279 / 551  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
American List Counsel, Inc.  
Mailing Address P.O. Box 32189

City State Zip Code  
Hartford CT 06150-2189

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
69850.90

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	2	/	2	0	0	9

**Transaction ID:** SA17-862902  
 Amount of Each Receipt this Period  
7781.06  
 Generic Cmte. List Rental  
 This payment reflects the usual and normal charge for rental of list(s).

**B.** Full Name (Last, First, Middle Initial)  
Bank of America, NA  
Mailing Address 730 15th Street, NW

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
137.55

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	9

**Transaction ID:** SA17-863323  
 Amount of Each Receipt this Period  
31.16  
 Interest

**C.** Full Name (Last, First, Middle Initial)  
American List Counsel, Inc.  
Mailing Address P.O. Box 32189

City State Zip Code  
Hartford CT 06150-2189

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
69850.90

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	9

**Transaction ID:** SA17-863299  
 Amount of Each Receipt this Period  
358.58  
 Generic Cmte. List Rental  
 This payment reflects the usual and normal charge for rental of list(s).

**SUBTOTAL** of Receipts This Page (optional) ..... ► **8170.80**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 280 / 551  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)  
Bank of America, NA

Mailing Address 730 15th Street, NW

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
137.55

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 4 / 3 0 / 2 0 0 9

Transaction ID: SA17-863322

Amount of Each Receipt this Period  
21.47

Interest

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	21.47
<b>TOTAL</b> This Period (last page this line number only) .....	▶	675617.62

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 281 / 551  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Amanda Kohn  
Mailing Address 7746 Wolford Way  
City Lorton State VA Zip Code 22079  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 103.28  
Date of Receipt 04 / 10 / 2009  
Transaction ID: SA15-862896  
Amount of Each Receipt this Period 86.83  
REIMBURSEMENT Delivery  
This reimbursement reflects the actual cost incurred by the committee for this expense.

**B.** Full Name (Last, First, Middle Initial)  
Amy Salomone  
Mailing Address 2568 University Place, N.W.  
Apt. 2  
City Washington State DC Zip Code 20009  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 29.68  
Date of Receipt 04 / 20 / 2009  
Transaction ID: SA15-863041  
Amount of Each Receipt this Period 17.11  
REIMBURSEMENT Travel  
This reimbursement reflects the actual cost paid by the committee to a third party vendor.

**C.** Full Name (Last, First, Middle Initial)  
Pace Butler  
Mailing Address 13915 N. Harvey Avenue  
City Edmond State OK Zip Code 73013  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 629.00  
Date of Receipt 04 / 20 / 2009  
Transaction ID: SA15-863040  
Amount of Each Receipt this Period 310.00  
REIMBURSEMENT Supplies  
This payment reflects the fair market value paid to the committee by a third party vendor.

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **413.94**  
**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 282 / 551  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Friends of Bennie Thompson  
Mailing Address PO Box 100  
City Bolton State MS Zip Code 39041  
FEC ID number of contributing federal political committee. **C** C00279851  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 174.30  
Date of Receipt 04 / 20 / 2009  
Transaction ID: SA15-863039  
Amount of Each Receipt this Period 174.30  
REIMBURSEMENT Postage  
This reimbursement reflects the actual cost paid by the committee to a third party vendor.

**B.** Full Name (Last, First, Middle Initial)  
United States Postal Service  
Mailing Address 30th Street Station  
City Philadelphia State PA Zip Code 19104  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 13916.00  
Date of Receipt 04 / 22 / 2009  
Transaction ID: SA15-862903  
Amount of Each Receipt this Period 1911.00  
REIMBURSEMENT Postage  
This reimbursement reflects the actual cost incurred by the committee for this expense.

**C.** Full Name (Last, First, Middle Initial)  
Kathleen Nee  
Mailing Address 407 A Street, NE  
City Washington State DC Zip Code 20002  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 4.98  
Date of Receipt 04 / 22 / 2009  
Transaction ID: SA15-862905  
Amount of Each Receipt this Period 4.98  
REIMBURSEMENT Travel  
This reimbursement reflects the actual cost paid by the committee to a third party vendor.

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2090.28  
**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Bank of America

Mailing Address P.O. Box 53155

City State Zip Code  
Phoenix AZ 85072-3155

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
29758.01

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	2	/	2	0	0	9

**Transaction ID:** SA15-862904

Amount of Each Receipt this Period  
29649.06

REIMBURSEMENT Travel

This reimbursement reflects the actual cost incurred by the committee for this expense.

**B.** Full Name (Last, First, Middle Initial)  
Beth Barefoot

Mailing Address 815 Maryland Ave NE  
Apt. 205

City State Zip Code  
Washington DC 20002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
232.63

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	7	/	2	0	0	9

**Transaction ID:** SA15-863139

Amount of Each Receipt this Period  
14.30

REIMBURSEMENT Delivery

This reimbursement reflects the actual cost paid by the committee to a third party vendor.

**C.** Full Name (Last, First, Middle Initial)  
United States Postal Service

Mailing Address 30th Street Station

City State Zip Code  
Philadelphia PA 19104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
13916.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	9

**Transaction ID:** SA15-863298

Amount of Each Receipt this Period  
938.00

REIMBURSEMENT Postage

This reimbursement reflects the actual cost incurred by the committee for this expense.

**SUBTOTAL** of Receipts This Page (optional) ..... ► **30601.36**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 284 / 551

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
Renee Schaeffer

Mailing Address 110 D Street SE  
Apt. 316

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: SA15-863245

Amount of Each Receipt this Period

300.00

REIMBURSEMENT Supplies

This reimbursement reflects the actual cost incurred by the committee for this expense.

**B.**

Full Name (Last, First, Middle Initial)  
Nancy Pelosi For Congress

Mailing Address 235 Montgomery Street, Ste 610

City State Zip Code  
San Francisco CA 94104

FEC ID number of contributing federal political committee. **C** C00213512

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1099.89

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: SA15-863193

Amount of Each Receipt this Period

1083.49

REIMBURSEMENT Delivery

This reimbursement reflects the actual cost paid by the committee to a third party vendor.

**C.**

Full Name (Last, First, Middle Initial)  
Nancy Pelosi For Congress

Mailing Address 235 Montgomery Street, Ste 610

City State Zip Code  
San Francisco CA 94104

FEC ID number of contributing federal political committee. **C** C00213512

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1099.89

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: SA15-863194

Amount of Each Receipt this Period

16.40

REIMBURSEMENT Delivery

This reimbursement reflects the actual cost paid by the committee to a third party vendor.

**SUBTOTAL** of Receipts This Page (optional) .....

1399.89

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 285 / 551  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Jacqueline M Forte-Mackay  
Mailing Address 7511 Jaffrey Road  
City State Zip Code  
Fort Washington MD 20744  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 15.59  
Date of Receipt: MM / DD / YYYY 04 / 30 / 2009  
Transaction ID: SA15-863244  
Amount of Each Receipt this Period 15.59  
REIMBURSEMENT Delivery  
This reimbursement reflects the actual cost incurred by the committee for this expense.

**B.** Full Name (Last, First, Middle Initial)  
GMMB  
Mailing Address 1010 Wisconsin Ave., NW  
City State Zip Code  
Washington DC 20007  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2224.80  
Date of Receipt: MM / DD / YYYY 04 / 30 / 2009  
Transaction ID: SA15-863302  
Amount of Each Receipt this Period 15.00  
REIMBURSEMENT Cmte. Media Buy  
This reimbursement reflects the actual cost incurred by the committee for this expense.

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	30.59
<b>TOTAL</b> This Period (last page this line number only) .....	▶	34536.06

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Sisk Mailing Service</p> <p>Mailing Address 203 Log Canoe Circle</p> <p>City Stevensville State MD Zip Code 21666</p> <p>Purpose of Disbursement Generic Cmte. Postage/Delivery</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862540</p> <p>Date of Disbursement 04 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 50353.00</p> <p>001 Category/Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America, NA</p> <p>Mailing Address 730 15th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863140</p> <p>Date of Disbursement 04 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 6292.44</p> <p>001 Category/Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America, NA</p> <p>Mailing Address 730 15th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863141</p> <p>Date of Disbursement 04 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 3482.91</p> <p>001 Category/Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

60128.35

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Bank of America, NA  Mailing Address 730 15th Street, NW  City Washington State DC Zip Code 20005  Purpose of Disbursement Generic Cmte. Bank Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863300 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 9	Amount of Each Disbursement this Period  25.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Bank of America, NA  Mailing Address 730 15th Street, NW  City Washington State DC Zip Code 20005  Purpose of Disbursement Generic Cmte. Bank Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863200 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 9	Amount of Each Disbursement this Period  6931.75
<b>C.</b>	Full Name (Last, First, Middle Initial) Bank of America, NA  Mailing Address 730 15th Street, NW  City Washington State DC Zip Code 20005  Purpose of Disbursement Generic Cmte. Bank Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863203 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 9	Amount of Each Disbursement this Period  5.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	6961.75
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Bank of America, NA  Mailing Address 730 15th Street, NW  City Washington State DC Zip Code 20005  Purpose of Disbursement Generic Cmte. Bank Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863303 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 9  Amount of Each Disbursement this Period 25.00  001 Category/ Type
B.	Full Name (Last, First, Middle Initial) Bank of America, NA  Mailing Address 730 15th Street, NW  City Washington State DC Zip Code 20005  Purpose of Disbursement Generic Cmte. Bank Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863304 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 9  Amount of Each Disbursement this Period 37.45  001 Category/ Type
C.	Full Name (Last, First, Middle Initial) Stockton, Inc.  Mailing Address 7940 Cessna Avenue  City Gaithersburg State MD Zip Code 20879  Purpose of Disbursement Generic Cmte. Postage/Delivery Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862541 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 9  Amount of Each Disbursement this Period 18.63  001 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>81.08</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Print Mail Communications</p> <p>Mailing Address 7201 Lockport Place</p> <p>City Lorton State VA Zip Code 22079</p> <p>Purpose of Disbursement Generic Cmte. Postage/Delivery</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862542</p> <p>Date of Disbursement 04 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 1882.34</p> <p>001 Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bank of America, NA</p> <p>Mailing Address 730 15th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863142</p> <p>Date of Disbursement 04 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 264.96</p> <p>001 Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bank of America, NA</p> <p>Mailing Address 730 15th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863143</p> <p>Date of Disbursement 04 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 272.66</p> <p>001 Category/Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

2419.96

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Bank of America, NA  Mailing Address 730 15th Street, NW  City Washington State DC Zip Code 20005  Purpose of Disbursement Generic Cmte. Bank Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863144 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 9	Amount of Each Disbursement this Period 1486.30
B.	Full Name (Last, First, Middle Initial) Bank of America, NA  Mailing Address 730 15th Street, NW  City Washington State DC Zip Code 20005  Purpose of Disbursement Generic Cmte. Bank Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863145 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 9	Amount of Each Disbursement this Period 58.19
C.	Full Name (Last, First, Middle Initial) Bank of America, NA  Mailing Address 730 15th Street, NW  City Washington State DC Zip Code 20005  Purpose of Disbursement Generic Cmte. Bank Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863301 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 9	Amount of Each Disbursement this Period 20.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1564.49

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Pacific Parking Services, Inc.	Transaction ID: SB21B-862543 Date of Disbursement
	Mailing Address 2404 Plyers Mill Road	<input type="text" value="04"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City Silver Spring State MD Zip Code 20902	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel Candidate Name	<input type="text" value="285.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="002"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) San Domenico Events	Transaction ID: SB21B-862544 Date of Disbursement
	Mailing Address 19 East 26th Street	<input type="text" value="04"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City New York State NY Zip Code 10010	Amount of Each Disbursement this Period
	Purpose of Disbursement Generic Cmte. Events/Meetings Candidate Name	<input type="text" value="15673.93"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value=""/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Bank of America, NA	Transaction ID: SB21B-863201 Date of Disbursement
	Mailing Address 730 15th Street, NW	<input type="text" value="04"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement Generic Cmte. Bank Fees Candidate Name	<input type="text" value="40.50"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="15999.43"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value=""/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Bank of America, NA <hr/> Mailing Address 730 15th Street, NW <hr/> City Washington State DC Zip Code 20005 Purpose of Disbursement Generic Cmte. Bank Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863305 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 9
	Amount of Each Disbursement this Period 20.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Print Mail Communications <hr/> Mailing Address 7201 Lockport Place <hr/> City Lorton State VA Zip Code 22079 Purpose of Disbursement Generic Cmte. Postage/Delivery Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862569 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 9
	Amount of Each Disbursement this Period 23220.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Bank of America, NA <hr/> Mailing Address 730 15th Street, NW <hr/> City Washington State DC Zip Code 20005 Purpose of Disbursement Generic Cmte. Bank Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863246 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 9
	Amount of Each Disbursement this Period 2003.09
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**25243.09**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jessica Aune</p> <p>Mailing Address 138A North Carolina Ave, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Travel Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862547 <b>Date of Disbursement</b> 04 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 38.28</p> <p>Category/Type 002</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Quick Messenger Service of DC, Inc.</p> <p>Mailing Address 4829 Fairmont Avenue Suite B</p> <p>City Bethesda State MD Zip Code 20814-6096</p> <p>Purpose of Disbursement Generic Cmte. Delivery Expense Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862556 <b>Date of Disbursement</b> 04 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 62.14</p> <p>Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Staples Business Advantages</p> <p>Mailing Address Dept DC PO Box 415256</p> <p>City Boston State MA Zip Code 02241</p> <p>Purpose of Disbursement Generic Cmte. Supplies Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862557 <b>Date of Disbursement</b> 04 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 115.61</p> <p>Category/Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**216.03**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Staples Business Advantages  Mailing Address Dept DC PO Box 415256  City Boston State MA Zip Code 02241  Purpose of Disbursement Generic Cmte. Supplies Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862558 Date of Disbursement 04 / 03 / 2009  Amount of Each Disbursement this Period 482.71
B.	Full Name (Last, First, Middle Initial) Staples Business Advantages  Mailing Address Dept DC PO Box 415256  City Boston State MA Zip Code 02241  Purpose of Disbursement Generic Cmte. Supplies Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862559 Date of Disbursement 04 / 03 / 2009  Amount of Each Disbursement this Period 1329.14
C.	Full Name (Last, First, Middle Initial) Alex Van Wagner  Mailing Address 1339 Perry Place NW  City Washington State DC Zip Code 20010  Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862561 Date of Disbursement 04 / 03 / 2009  Amount of Each Disbursement this Period 61.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1872.85

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Louisa Whitney</p> <p>Mailing Address 1701 16th St., NW Apt. 721</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Telephones</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862562</p> <p>Date of Disbursement 04 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>001 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Louisa Whitney</p> <p>Mailing Address 1701 16th St., NW Apt. 721</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Telephones</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862563</p> <p>Date of Disbursement 04 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>001 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Louisa Whitney</p> <p>Mailing Address 1701 16th St., NW Apt. 721</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862564</p> <p>Date of Disbursement 04 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 280.11</p> <p>002 Category/ Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**380.11**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Louisa Whitney</p> <p>Mailing Address 1701 16th St., NW Apt. 721</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Travel Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862565</p> <p>Date of Disbursement 04 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 41.15</p> <p>Category/Type 002</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Terri New</p> <p>Mailing Address 11740 San Vicente Blvd Suite 204</p> <p>City Los Angeles State CA Zip Code 90049</p> <p>Purpose of Disbursement Generic Cmte. Fundraising Svcs Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862548</p> <p>Date of Disbursement 04 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 8000.00</p> <p>Category/Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Diana Fassbender</p> <p>Mailing Address 1629 Columbia Rd NW Apt 630</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Telephones Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862549</p> <p>Date of Disbursement 04 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 80.00</p> <p>Category/Type 001</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

8121.15

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Federal Express</p> <p>Mailing Address PO Box 371461</p> <p>City Pittsburgh State PA Zip Code 15250-7461</p> <p>Purpose of Disbursement Generic Cmte. Delivery Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862550</p> <p>Date of Disbursement 04 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 39.87</p> <p>Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Melissa Kurek</p> <p>Mailing Address 1741 U St NW Apt 1</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862551</p> <p>Date of Disbursement 04 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 51.00</p> <p>Category/Type 002</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Nicole Landset</p> <p>Mailing Address 1826 15th Street, NW</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Generic Cmte. Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862552</p> <p>Date of Disbursement 04 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 117.57</p> <p>Category/Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

208.44

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Kevin McKeon	Transaction ID: SB21B-862553 Date of Disbursement 04 / 03 / 2009
	Mailing Address 408 15th St., SE Unit B	Amount of Each Disbursement this Period 78.25
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Generic Cmte. Research Materials	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Elyse Pollick	Transaction ID: SB21B-862554 Date of Disbursement 04 / 03 / 2009
	Mailing Address 171 Coventry Road	Amount of Each Disbursement this Period 25.50
	City Dallastown State PA Zip Code 17313	
	Purpose of Disbursement Travel	002 Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Lisa Presta	Transaction ID: SB21B-862555 Date of Disbursement 04 / 03 / 2009
	Mailing Address 2337 16th Ave.	Amount of Each Disbursement this Period 8000.00
	City San Francisco State CA Zip Code 94116	
	Purpose of Disbursement Generic Cmte. Fundraising Svcs	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	8103.75
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Christian Taylor</p> <p>Mailing Address 4556 Texas Avenue, SE</p> <p>City Washington State DC Zip Code 20019</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862570</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="120.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) GMMB</p> <p>Mailing Address 1010 Wisconsin Ave., NW</p> <p>City Washington State DC Zip Code 20007</p> <p>Purpose of Disbursement Generic Cmte. Media Buys</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862567</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="14975.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Automatic Data Processing</p> <p>Mailing Address 11411 Red Run Blvd.</p> <p>City Owings Mills State MD Zip Code 21117</p> <p>Purpose of Disbursement Computer Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862778</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="268.81"/></p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America, NA</p> <p>Mailing Address 730 15th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863146</p> <p>Date of Disbursement 04 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 1461.71</p> <p>001 Category/Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America, NA</p> <p>Mailing Address 730 15th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863147</p> <p>Date of Disbursement 04 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 468.46</p> <p>001 Category/Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America, NA</p> <p>Mailing Address 730 15th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863148</p> <p>Date of Disbursement 04 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 266.96</p> <p>001 Category/Type</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2197.13
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Bank of America, NA  Mailing Address 730 15th Street, NW  City Washington State DC Zip Code 20005  Purpose of Disbursement Generic Cmte. Bank Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863202 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 9  Amount of Each Disbursement this Period 12647.66  001 Category/ Type
B.	Full Name (Last, First, Middle Initial) United States Postal Service  Mailing Address 900 Brentwood Road, NE  City Washington State DC Zip Code 20066  Purpose of Disbursement Generic Cmte. Postage/Delivery Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862578 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 0 9  Amount of Each Disbursement this Period 745.00  001 Category/ Type
C.	Full Name (Last, First, Middle Initial) Big Eye Direct  Mailing Address Attn: Mike Calder 13864 Redskin Drive  City Herndon State VA Zip Code 20171  Purpose of Disbursement Generic Cmte. Postage/Delivery Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862579 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 0 9  Amount of Each Disbursement this Period 26210.47  001 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>39603.13</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) American List Counsel, Inc.</p> <p>Mailing Address P.O. Box 32189</p> <p>City Hartford State CT Zip Code 06150-2189</p> <p>Purpose of Disbursement Generic Cmte. List Exchange</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862580</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 68.06</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) American List Counsel, Inc.</p> <p>Mailing Address P.O. Box 32189</p> <p>City Hartford State CT Zip Code 06150-2189</p> <p>Purpose of Disbursement Generic Cmte. List Exchange</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862581</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 60.06</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) American List Counsel, Inc.</p> <p>Mailing Address P.O. Box 32189</p> <p>City Hartford State CT Zip Code 06150-2189</p> <p>Purpose of Disbursement Generic Cmte. List Exchange</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862582</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 894.29</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1022.41</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) American List Counsel, Inc.</p> <p>Mailing Address P.O. Box 32189</p> <p>City Hartford State CT Zip Code 06150-2189</p> <p>Purpose of Disbursement Generic Cmte. List Exchange</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862583</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 310.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) The Production Advantage Inc.</p> <p>Mailing Address 14120 Sullyfield Cir., Suite C</p> <p>City Chantilly State VA Zip Code 20151</p> <p>Purpose of Disbursement Generic Cmte. Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862607</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 26321.49</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) The Production Advantage Inc.</p> <p>Mailing Address 14120 Sullyfield Cir., Suite C</p> <p>City Chantilly State VA Zip Code 20151</p> <p>Purpose of Disbursement Generic Cmte. Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862608</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 3939.30</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

30570.79

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Data Direct, Inc. <hr/> Mailing Address 181 Potomac Street PO Box 855 <hr/> City Harpers State WV Zip Code 25425 <hr/> Purpose of Disbursement Computer Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-862609 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 2825.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Deliveries Plus, Inc. <hr/> Mailing Address PO Box 45013 <hr/> City Somerville State MA Zip Code 02145 <hr/> Purpose of Disbursement Generic Cmte. Delivery Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-862610 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 56.36
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Deliveries Plus, Inc. <hr/> Mailing Address PO Box 45013 <hr/> City Somerville State MA Zip Code 02145 <hr/> Purpose of Disbursement Generic Cmte. Delivery Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-862611 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 56.36
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

2937.72

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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 Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Deliveries Plus, Inc.	Transaction ID: SB21B-862612 Date of Disbursement
	Mailing Address PO Box 45013	<input type="text" value="04"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City Somerville State MA Zip Code 02145	Amount of Each Disbursement this Period
	Purpose of Disbursement Generic Cmte. Delivery Expense	<input type="text" value="56.36"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Deliveries Plus, Inc.	Transaction ID: SB21B-862613 Date of Disbursement
	Mailing Address PO Box 45013	<input type="text" value="04"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City Somerville State MA Zip Code 02145	Amount of Each Disbursement this Period
	Purpose of Disbursement Generic Cmte. Delivery Expense	<input type="text" value="56.36"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Samantha Gross	Transaction ID: SB21B-862584 Date of Disbursement
	Mailing Address 10605 Concord Street Suite 202	<input type="text" value="04"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City Kensington State MD Zip Code 20895	Amount of Each Disbursement this Period
	Purpose of Disbursement Generic Cmte. Fundraising Svcs	<input type="text" value="7500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="7612.72"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Samantha Gross</p> <p>Mailing Address 10605 Concord Street Suite 202</p> <p>City Kensington State MD Zip Code 20895</p> <p>Purpose of Disbursement Generic Cmte. Fundraising Svcs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862585</p> <p>Date of Disbursement MM / DD / YYYY 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 7500.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) 4C Partners, LLC</p> <p>Mailing Address 1415 Rhode Island Ave., NW #316</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Generic Strategic Political Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862586</p> <p>Date of Disbursement MM / DD / YYYY 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 20000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Drew Altizer</p> <p>Mailing Address 1949 Green Street #2</p> <p>City San Francisco State CA Zip Code 94123</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862587</p> <p>Date of Disbursement MM / DD / YYYY 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 600.00</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

28100.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) AVF Consulting, Inc.	Transaction ID: SB21B-862588 Date of Disbursement 04 / 08 / 2009
	Mailing Address 1220-C Joppa Road Suite 514 City Baltimore State MD Zip Code 21286 Purpose of Disbursement Computer Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 90.00 Category/Type

B.	Full Name (Last, First, Middle Initial) The Benenson Strategy Group	Transaction ID: SB21B-862589 Date of Disbursement 04 / 08 / 2009
	Mailing Address 14 East 60th Street Suite 1002 City New York State NY Zip Code 10022 Purpose of Disbursement Generic Cmte. Polling Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 11500.00 Category/Type 005

C.	Full Name (Last, First, Middle Initial) Government News Network GovNet	Transaction ID: SB21B-862590 Date of Disbursement 04 / 08 / 2009
	Mailing Address P.O. Box 2041 City Trenton State NJ Zip Code 08607 Purpose of Disbursement Generic Cmte. Publications Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 125.00 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	11715.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)  
Joshua Roberts Photography, LLC

Transaction ID: SB21B-862591  
Date of Disbursement

Mailing Address 1217 F Street, NE

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	0	9

City Washington State DC Zip Code 20002

Amount of Each Disbursement this Period

600.00
--------

Purpose of Disbursement  
Generic Cmte. Events/Meetings

--

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Macke Water Systems, Inc.

Transaction ID: SB21B-862594  
Date of Disbursement

Mailing Address P.O. Box 545

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	0	9

City Wheeling State IL Zip Code 60090

Amount of Each Disbursement this Period

126.90
--------

Purpose of Disbursement  
Equipment Rental/Maintenance

001
-----

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Verizon Business

Transaction ID: SB21B-862595  
Date of Disbursement

Mailing Address 500 Technology Drive

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	0	9

City Weldon Springs State MO Zip Code 63304

Amount of Each Disbursement this Period

5757.60
---------

Purpose of Disbursement  
Telephones

001
-----

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

6484.50
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**TOTAL** This Period (last page this line number only) ..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) NCEC Services, Inc. <hr/> Mailing Address 122 C Street, NW Suite 650 <hr/> City Washington State DC Zip Code 20001 <hr/> Purpose of Disbursement Generic Strategic Political Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862596 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 15000.00
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Pitney Bowes Global Financial Services LLC <hr/> Mailing Address PO Box 856460 <hr/> City Louisville State KY Zip Code 40285 <hr/> Purpose of Disbursement Equipment Rental/Maintenance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862597 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 4227.77
	Category/ Type 001
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Roll Call, Inc. <hr/> Mailing Address 50 F Street, NW 7th Floor <hr/> City Washington State DC Zip Code 20001 <hr/> Purpose of Disbursement Subscriptions Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862598 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 2687.11
	Category/ Type
	Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**21914.88**

**TOTAL** This Period (last page this line number only) ..... ▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Key Equipment Finance	Transaction ID: SB21B-862614 Date of Disbursement
	Mailing Address: Payment Processing P.O. Box 74713	<input type="text" value="04"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City: Cleveland State: OH Zip Code: 44194	Amount of Each Disbursement this Period
	Purpose of Disbursement: Equipment Rental/Maintenance Candidate Name	<input type="text" value="797.36"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type: <input type="text" value="001"/>
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Key Equipment Finance	Transaction ID: SB21B-862615 Date of Disbursement
	Mailing Address: Payment Processing P.O. Box 74713	<input type="text" value="04"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City: Cleveland State: OH Zip Code: 44194	Amount of Each Disbursement this Period
	Purpose of Disbursement: Equipment Rental/Maintenance Candidate Name	<input type="text" value="394.13"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type: <input type="text" value="001"/>
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Jason O'Malley	Transaction ID: SB21B-862616 Date of Disbursement
	Mailing Address: 7 Conestoga Road	<input type="text" value="04"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City: Lancaster State: PA Zip Code: 17603	Amount of Each Disbursement this Period
	Purpose of Disbursement: Generic Cmte. Fundraising Svcs Candidate Name	<input type="text" value="3000.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type: <input type="text"/>
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) McMahon, Squier, Lapp and Associates</p> <p>Mailing Address 300 N. Lee Street Suite 500</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Generic Cmte. Media Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862617</p> <p>Date of Disbursement MM / DD / YYYY 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 11892.06</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) AT &amp; T Mobility</p> <p>Mailing Address PO Box 6463</p> <p>City Carol Stream State IL Zip Code 60197-6463</p> <p>Purpose of Disbursement Telephones</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862735</p> <p>Date of Disbursement MM / DD / YYYY 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 2656.61</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) The Tony Bennett 1994 Family Trust</p> <p>Mailing Address Tony Bennett 48 West 10th Street, Suite B</p> <p>City New York State NY Zip Code 10011</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862734</p> <p>Date of Disbursement MM / DD / YYYY 04 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 2734.37</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

17283.04

**TOTAL** This Period (last page this line number only) ..... ▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Anne G Getty</p> <p>Mailing Address 2880 Broadway</p> <p>City San Francisco State CA Zip Code 94115</p> <p>Purpose of Disbursement Offset For In-Kind Events</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862900</p> <p>Date of Disbursement 04 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 14289.57</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Gordon Getty</p> <p>Mailing Address 2880 Broadway</p> <p>City San Francisco State CA Zip Code 94115</p> <p>Purpose of Disbursement Offset For In-Kind Events</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862899</p> <p>Date of Disbursement 04 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 14289.57</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America, NA</p> <p>Mailing Address 730 15th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Generic Cmte. Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863199</p> <p>Date of Disbursement 04 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 4286.04</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**32865.18**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Bank of America, NA  Mailing Address 730 15th Street, NW  City Washington State DC Zip Code 20005  Purpose of Disbursement Generic Cmte. Bank Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB21B-863306 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 9	Amount of Each Disbursement this Period 20.56
<b>B.</b>	Full Name (Last, First, Middle Initial) DirectAdvantage Marketing  Mailing Address The Outreach Center PO Box 55043  City Boston State MA Zip Code 02205  Purpose of Disbursement Generic Cmte. Telemarketing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB21B-862773 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 9	Amount of Each Disbursement this Period 5571.35
<b>C.</b>	Full Name (Last, First, Middle Initial) Google, Inc.  Mailing Address Dept. 33654 PO Box 39000  City San Francisco State CA Zip Code 94139  Purpose of Disbursement Generic Cmte. Advertising Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB21B-862774 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 9	Amount of Each Disbursement this Period 224.27

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<b>5816.18</b>	
<b>TOTAL</b> This Period (last page this line number only) .....			

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 316 / 551

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) The Production Advantage Inc.</p> <p>Mailing Address 14120 Sullyfield Cir., Suite C</p> <p>City Chantilly State VA Zip Code 20151</p> <p>Purpose of Disbursement Generic Cmte. Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862775 <b>Date of Disbursement</b> 04 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 58055.26</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) The Production Advantage Inc.</p> <p>Mailing Address 14120 Sullyfield Cir., Suite C</p> <p>City Chantilly State VA Zip Code 20151</p> <p>Purpose of Disbursement Generic Cmte. Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862776 <b>Date of Disbursement</b> 04 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 1047.50</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Telefund, Inc.</p> <p>Mailing Address Attention: Nicole Lane P.O. Box 2366</p> <p>City Denver State CO Zip Code 80201-2366</p> <p>Purpose of Disbursement Generic Cmte. Telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862777 <b>Date of Disbursement</b> 04 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 16900.80</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

76003.56

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Aramark Refreshment Services</p> <p>Mailing Address 8240 Stayton Drive Suite N</p> <p>City Jessup State MD Zip Code 20794</p> <p>Purpose of Disbursement Generic Cmte. Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862744</p> <p>Date of Disbursement 04 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 600.34</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Aramark Refreshment Services</p> <p>Mailing Address 8240 Stayton Drive Suite N</p> <p>City Jessup State MD Zip Code 20794</p> <p>Purpose of Disbursement Generic Cmte. Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862745</p> <p>Date of Disbursement 04 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 693.88</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Aramark Refreshment Services</p> <p>Mailing Address 8240 Stayton Drive Suite N</p> <p>City Jessup State MD Zip Code 20794</p> <p>Purpose of Disbursement Generic Cmte. Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862746</p> <p>Date of Disbursement 04 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 781.05</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

2075.27

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Earl L. Ashton</p> <p>Mailing Address 6924 9th Street NW</p> <p>City Washington State DC Zip Code 20012</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862747</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="59.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Terri New</p> <p>Mailing Address 11740 San Vicente Blvd Suite 204</p> <p>City Los Angeles State CA Zip Code 90049</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862748</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1021.14"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carey International, Inc.</p> <p>Mailing Address Billing Department P.O. Box 631414</p> <p>City Baltimore State MD Zip Code 21263-1414</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862749</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1081.56"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="2161.70"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Riely Clough</p> <p>Mailing Address 140 St. Marks Avenue #2</p> <p>City Brooklyn State NY Zip Code 11217</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862750</p> <p>Date of Disbursement 04 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 400.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Coast to Coast</p> <p>Mailing Address 4277 Valley Fair Street</p> <p>City Simi Valley State CA Zip Code 93063</p> <p>Purpose of Disbursement Generic Cmte. Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862751</p> <p>Date of Disbursement 04 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 419.68</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Coast to Coast</p> <p>Mailing Address 4277 Valley Fair Street</p> <p>City Simi Valley State CA Zip Code 93063</p> <p>Purpose of Disbursement Generic Cmte. Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862752</p> <p>Date of Disbursement 04 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 358.00</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1177.68

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Lauren Dikis <hr/> Mailing Address 3105 11th St., NW <hr/> City Washington State DC Zip Code 20010 <hr/> Purpose of Disbursement Telephones Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862753 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 9	Amount of Each Disbursement this Period 79.98
B.	Full Name (Last, First, Middle Initial) Democratic Properties Corporation <hr/> Mailing Address Operating Account 430 South Capitol Street, SE <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement Generic Cmte. Rent/Occupancy Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862754 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 9	Amount of Each Disbursement this Period 59900.00
C.	Full Name (Last, First, Middle Initial) Democratic Properties Corporation <hr/> Mailing Address Leasehold Account 430 South Capitol Street, SE <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement Leasehold Improvements Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862755 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 9	Amount of Each Disbursement this Period 4218.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**64197.98**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Amanda Ehrman	Transaction ID: SB21B-862756 Date of Disbursement																			
	Mailing Address 11740 San Vincent Blvd. Suite 204	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	7		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	7		2	0	0	9												
	City Los Angeles State CA Zip Code 90049	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Travel Candidate Name	<table border="1"><tr><td>75.07</td></tr></table>	75.07																		
75.07																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		002 Category/Type																			

B.	Full Name (Last, First, Middle Initial) Amanda Ehrman	Transaction ID: SB21B-862757 Date of Disbursement																			
	Mailing Address 11740 San Vincent Blvd. Suite 204	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	7		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	7		2	0	0	9												
	City Los Angeles State CA Zip Code 90049	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Travel Candidate Name	<table border="1"><tr><td>72.48</td></tr></table>	72.48																		
72.48																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		002 Category/Type																			

C.	Full Name (Last, First, Middle Initial) Fitzsimmons, Tom	Transaction ID: SB21B-862758 Date of Disbursement																			
	Mailing Address 30 Normandy Avenue #403	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	7		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	7		2	0	0	9												
	City Sommerville State MA Zip Code 02138	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Generic Cmte. Events/Meetings Candidate Name	<table border="1"><tr><td>350.00</td></tr></table>	350.00																		
350.00																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		Category/Type																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>497.55</td></tr></table>	497.55
497.55		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 322 / 551

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Gordon's Fine Wines and Liquor	Transaction ID: SB21B-862759 Date of Disbursement
	Mailing Address PO Box 310	<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City Waltham State MA Zip Code 02454	Amount of Each Disbursement this Period
	Purpose of Disbursement Generic Cmte. Events/Meetings	<input type="text" value="382.28"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Insight	Transaction ID: SB21B-862760 Date of Disbursement
	Mailing Address P.O. Box 78825	<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City Phoenix State AZ Zip Code 85062-8825	Amount of Each Disbursement this Period
	Purpose of Disbursement Equipment Rental/Maintenance	<input type="text" value="652.47"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Insight	Transaction ID: SB21B-862761 Date of Disbursement
	Mailing Address P.O. Box 78825	<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City Phoenix State AZ Zip Code 85062-8825	Amount of Each Disbursement this Period
	Purpose of Disbursement Equipment Rental/Maintenance	<input type="text" value="652.47"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Insight Mailing Address P.O. Box 78825 City Phoenix State AZ Zip Code 85062-8825 Purpose of Disbursement Generic Cmte. Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862762 Date of Disbursement 04 / 17 / 2009
	Amount of Each Disbursement this Period 85.37
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Ryan Karlsgodt Mailing Address 2900 Q Street, NW Apt. 2B City Washington State DC Zip Code 20007 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862763 Date of Disbursement 04 / 17 / 2009
	Amount of Each Disbursement this Period 66.00
	Category/ Type 002
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Melissa Kurek Mailing Address 1741 U St NW Apt 1 City Washington State DC Zip Code 20009 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862764 Date of Disbursement 04 / 17 / 2009
	Amount of Each Disbursement this Period 52.98
	Category/ Type 002
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

204.35

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Melissa Kurek  Mailing Address 1741 U St NW Apt 1  City Washington State DC Zip Code 20009  Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-862765 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 9	Amount of Each Disbursement this Period  36.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Verizon Business  Mailing Address 500 Technology Drive  City Weldon Springs State MO Zip Code 63304  Purpose of Disbursement Telephones Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-862766 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 9	Amount of Each Disbursement this Period  6924.67
<b>C.</b>	Full Name (Last, First, Middle Initial) Occasions Caterers, Inc.  Mailing Address 5458 3rd Street, NE  City Washington State DC Zip Code 20011  Purpose of Disbursement Generic Cmte. Catering Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-862767 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 9	Amount of Each Disbursement this Period  1998.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

8959.20

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Laura Rose</p> <p>Mailing Address 1722 19th Street, NW #703</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862768</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="23.00"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Amy Strathdee</p> <p>Mailing Address 350 9th Street #31</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862769</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="140.60"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) United Parcel Service</p> <p>Mailing Address PO Box 7247-0244</p> <p>City Philadelphia State PA Zip Code 19170-0001</p> <p>Purpose of Disbursement Generic Cmte. Delivery Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862770</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="573.10"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="736.70"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text" value=""/></p>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) United Parcel Service</p> <p>Mailing Address PO Box 7247-0244</p> <p>City Philadelphia State PA Zip Code 19170-0001</p> <p>Purpose of Disbursement Generic Cmte. Delivery Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862771</p> <p>Date of Disbursement MM / DD / YYYY 04 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 8.72</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Louisa Whitney</p> <p>Mailing Address 1701 16th St., NW Apt. 721</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862772</p> <p>Date of Disbursement MM / DD / YYYY 04 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 68.25</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Washington Metropolitan Area Transit Authority</p> <p>Mailing Address 600 Fifth Street, NW</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862901</p> <p>Date of Disbursement MM / DD / YYYY 04 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 3354.35</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**3431.32**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Automatic Data Processing</p> <p>Mailing Address 11411 Red Run Blvd.</p> <p>City Owings Mills State MD Zip Code 21117</p> <p>Purpose of Disbursement Computer Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862779</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="47.16"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) United States Postal Service</p> <p>Mailing Address 900 Brentwood Road, NE</p> <p>City Washington State DC Zip Code 20066</p> <p>Purpose of Disbursement Generic Cmte. Postage/Delivery</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862795</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="20000.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Beth Barefoot</p> <p>Mailing Address 815 Maryland Ave NE Apt. 205</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Telephones</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862783</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="89.98"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="20137.14"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Yates Baroodly</p> <p>Mailing Address 2414 Tunlaw Road NW</p> <p>City Washington State DC Zip Code 20007</p> <p>Purpose of Disbursement Telephones Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862784 <b>Date of Disbursement</b> 04 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 64.27</p> <p>001 Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Brennan Bilberry</p> <p>Mailing Address 722 5th St NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Per Diem Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862785 <b>Date of Disbursement</b> 04 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 375.00</p> <p>Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) John Brougher</p> <p>Mailing Address 6347 N Nottingham Street</p> <p>City McLean State VA Zip Code 22101</p> <p>Purpose of Disbursement Travel Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862786 <b>Date of Disbursement</b> 04 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 58.90</p> <p>002 Category/Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

498.17

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) John Brougher</p> <p>Mailing Address 6347 N Nottingham Street</p> <p>City McLean State VA Zip Code 22101</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB21B-862787</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.20"/></p> <p>Category/Type: <input type="text" value="002"/></p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Dell Business Credit</p> <p>Mailing Address Payment Processing Center PO Box 5275</p> <p>City Carol Stream State IL Zip Code 60197</p> <p>Purpose of Disbursement Equipment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB21B-862788</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="18061.55"/></p> <p>Category/Type: <input type="text"/></p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Dell Business Credit</p> <p>Mailing Address Payment Processing Center PO Box 5275</p> <p>City Carol Stream State IL Zip Code 60197</p> <p>Purpose of Disbursement Generic Cmte. Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB21B-862789</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="81.51"/></p> <p>Category/Type: <input type="text"/></p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Melissa Kurek  Mailing Address 1741 U St NW Apt 1  City Washington State DC Zip Code 20009 Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-862790 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 9	Amount of Each Disbursement this Period 44.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Heather McHugh  Mailing Address 2130 P Street NW Apt.603  City Washington State DC Zip Code 20037 Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-862791 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 9	Amount of Each Disbursement this Period 50.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Jennifer Pihlaja  Mailing Address 3300 16th St NW #1015  City Washington State DC Zip Code 20010 Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-862792 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 9	Amount of Each Disbursement this Period 206.26

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>300.26</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Ryan Rudominer</p> <p>Mailing Address 1320 N. Veitech Street Apt. 1201</p> <p>City Arlington State VA Zip Code 22201</p> <p>Purpose of Disbursement Per Diem</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862793</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="375.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Todd Schulte</p> <p>Mailing Address 631 D Street, NW Apt. 230</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement Per Diem</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862794</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="375.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Global Strategy Group, LLC</p> <p>Mailing Address 895 Broadway, 5th Floor</p> <p>City New York State NY Zip Code 10003</p> <p>Purpose of Disbursement Generic Strategic Political Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862796</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="10000.00"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="10750.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) DC Treasurer</p> <p>Mailing Address PO Box 679 Ben Franklin Station</p> <p>City Washington State DC Zip Code 20044</p> <p>Purpose of Disbursement Use Tax Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862895 <b>Date of Disbursement</b> 04 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 1449.12</p> <p>Category/Type 001</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Simon Falic</p> <p>Mailing Address 150 Harbour Way</p> <p>City Bal Harbour State FL Zip Code 33154</p> <p>Purpose of Disbursement Offset For In-Kind Events Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863314 <b>Date of Disbursement</b> 04 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 2925.00</p> <p>Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Generic Cmte. Supplies Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862906 <b>Date of Disbursement</b> 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 151.38</p> <p>Category/Type</p> <p>See Attached Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

4525.50

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>TARGET</b></p> <p>Mailing Address 3101 Jefferson Davis Hwy</p> <p>City Alexandria State VA Zip Code 22305</p> <p>Purpose of Disbursement Generic Cmte. Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862906-10000</p> <p>Date of Disbursement MM / DD / YYYY 03 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 12.42</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>FTD FTD.COM</b></p> <p>Mailing Address 3113 Woodcreek Drive</p> <p>City Downers Grove State IL Zip Code 60515</p> <p>Purpose of Disbursement Generic Cmte. Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862906-20000</p> <p>Date of Disbursement MM / DD / YYYY 04 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 74.98</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>FTD FTD.COM</b></p> <p>Mailing Address 3113 Woodcreek Drive</p> <p>City Downers Grove State IL Zip Code 60515</p> <p>Purpose of Disbursement Generic Cmte. Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862906-30000</p> <p>Date of Disbursement MM / DD / YYYY 04 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 63.98</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Generic Cmte. Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862907</p> <p>Date of Disbursement 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 47.55</p> <p>Category/Type</p> <p>See Attached Memo Entry</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) FedEx Kinkos</p> <p>Mailing Address 4809 Bethesda Ave.</p> <p>City Bethesda State MD Zip Code 20814</p> <p>Purpose of Disbursement Generic Cmte. Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862907-10000</p> <p>Date of Disbursement 03 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 47.55</p> <p>Category/Type</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862908</p> <p>Date of Disbursement 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 262.27</p> <p>Category/Type 002</p> <p>See Attached Memo Entry</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>309.82</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) CALIFORNIA TORTILLA</p> <p>Mailing Address 728 7th St NW</p> <p>City WASHINGTON State DC Zip Code 20001</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862908-10000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="87.43"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) CALIFORNIA TORTILLA</p> <p>Mailing Address 728 7th St NW</p> <p>City WASHINGTON State DC Zip Code 20001</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862908-20000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="87.42"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) CALIFORNIA TORTILLA</p> <p>Mailing Address 728 7th St NW</p> <p>City WASHINGTON State DC Zip Code 20001</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862908-30000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="87.42"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="0.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text" value=""/></p>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address P.O. Box 53155  City Phoenix State AZ Zip Code 85072-3155  Purpose of Disbursement Generic Cmte. Events/Meetings Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862909 Date of Disbursement 04 / 22 / 2009  Amount of Each Disbursement this Period 201.88  See Attached Memo Entry
B.	Full Name (Last, First, Middle Initial) TELEFLORA.COM  Mailing Address P.O. Box 60910  City Los Angeles State CA Zip Code 90600  Purpose of Disbursement Generic Cmte. Events/Meetings Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862909-10000 Date of Disbursement 03 / 12 / 2009  Amount of Each Disbursement this Period 100.94  [MEMO ITEM] Memo Entry
C.	Full Name (Last, First, Middle Initial) TELEFLORA.COM  Mailing Address P.O. Box 60910  City Los Angeles State CA Zip Code 90600  Purpose of Disbursement Generic Cmte. Events/Meetings Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862909-20000 Date of Disbursement 03 / 12 / 2009  Amount of Each Disbursement this Period 100.94  [MEMO ITEM] Memo Entry

SUBTOTAL of Disbursements This Page (optional) ..... ▶

201.88

TOTAL This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862910</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1206.42"/></p> <p>See Attached Memo Entry</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) ORBITZ</p> <p>Mailing Address 500 West Madison Street Suite</p> <p>City Chicago State IL Zip Code 60661</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862910-10000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="13.98"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) UNITED AIR</p> <p>Mailing Address P.O. Box 66100</p> <p>City Chicago State IL Zip Code 60666</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862910-20000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="472.20"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="1206.42"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) UNITED AIR <hr/> Mailing Address P.O. Box 66100 <hr/> City Chicago State IL Zip Code 60666 <hr/> Purpose of Disbursement Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862910-30000 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 8 / 2 0 0 9	Amount of Each Disbursement this Period 472.20
			[MEMO ITEM] Memo Entry
<b>B.</b>	Full Name (Last, First, Middle Initial) JURYS CUFFS IRISH BAR <hr/> Mailing Address 154 Berkely Street <hr/> City BOSTON State MA Zip Code 02116 <hr/> Purpose of Disbursement Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862910-40000 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 9	Amount of Each Disbursement this Period 40.00
			[MEMO ITEM] Memo Entry
<b>C.</b>	Full Name (Last, First, Middle Initial) JURYS BOSTON HOTEL <hr/> Mailing Address 350 Stuart Street <hr/> City BOSTON State MA Zip Code 02116 <hr/> Purpose of Disbursement Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862910-50000 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 208.04
			[MEMO ITEM] Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address P.O. Box 53155  City Phoenix State AZ Zip Code 85072-3155 Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862911 Date of Disbursement 04 / 22 / 2009  Amount of Each Disbursement this Period 797.45  See Attached Memo Entry	
<b>B.</b>	Full Name (Last, First, Middle Initial) AMTRAK .COM  Mailing Address 60 Massachusetts Avenue, NE  City Washington State DC Zip Code 20002 Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862911-10000 Date of Disbursement 03 / 12 / 2009  Amount of Each Disbursement this Period 310.00  [MEMO ITEM] Memo Entry	
<b>C.</b>	Full Name (Last, First, Middle Initial) AMTRAK .COM  Mailing Address 60 Massachusetts Avenue, NE  City Washington State DC Zip Code 20002 Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862911-20000 Date of Disbursement 03 / 13 / 2009  Amount of Each Disbursement this Period 310.00  [MEMO ITEM] Memo Entry	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	797.45
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) AFFINIA FIFTY</p> <p>Mailing Address 155 E 50th Street</p> <p>City NEW YORK State NY Zip Code 10022</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862911-30000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="120.61"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) NYC TAXI</p> <p>Mailing Address 303 9th Ave</p> <p>City New York State NY Zip Code 10001</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862911-40000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="10.68"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) NYC TAXI</p> <p>Mailing Address 303 9th Ave</p> <p>City New York State NY Zip Code 10001</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862911-50000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="14.76"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) NYC TAXI Mailing Address 303 9th Ave City New York State NY Zip Code 10001 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B-862911-60000 Date of Disbursement 03 / 16 / 2009
	Amount of Each Disbursement this Period 16.70 [MEMO ITEM] Memo Entry

<b>B.</b> Full Name (Last, First, Middle Initial) NYC TAXI Mailing Address 303 9th Ave City New York State NY Zip Code 10001 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B-862911-70000 Date of Disbursement 03 / 16 / 2009
	Amount of Each Disbursement this Period 14.70 [MEMO ITEM] Memo Entry

<b>C.</b> Full Name (Last, First, Middle Initial) Bank of America Mailing Address P.O. Box 53155 City Phoenix State AZ Zip Code 85072-3155 Purpose of Disbursement Generic Cmte. Events/Meetings Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B-862912 Date of Disbursement 04 / 22 / 2009
	Amount of Each Disbursement this Period 508.78 See Attached Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	508.78
<b>TOTAL</b> This Period (last page this line number only) .....	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) TREFROGS</p> <p>Mailing Address 363 N. Robertson Blvd</p> <p>City West Hollywood State CA Zip Code 90048</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862912-10000</p> <p>Date of Disbursement MM / DD / YYYY 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 167.79</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) TREFROGS</p> <p>Mailing Address 363 N. Robertson Blvd</p> <p>City West Hollywood State CA Zip Code 90048</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862912-20000</p> <p>Date of Disbursement MM / DD / YYYY 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 173.20</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) TREFROGS</p> <p>Mailing Address 363 N. Robertson Blvd</p> <p>City West Hollywood State CA Zip Code 90048</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862912-30000</p> <p>Date of Disbursement MM / DD / YYYY 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 167.79</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address P.O. Box 53155  City Phoenix State AZ Zip Code 85072-3155 Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862913 Date of Disbursement 04 / 22 / 2009  Amount of Each Disbursement this Period 2.50  See Attached Memo Entry	002 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) CITY OF BERKELEY PARKEZ  Mailing Address 1947 Center Street  City BERKELEY State CA Zip Code 94704 Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862913-10000 Date of Disbursement 03 / 10 / 2009  Amount of Each Disbursement this Period 1.25  [MEMO ITEM] Memo Entry	002 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) CITY OF BERKELEY PARKEZ  Mailing Address 1947 Center Street  City BERKELEY State CA Zip Code 94704 Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862913-20000 Date of Disbursement 03 / 10 / 2009  Amount of Each Disbursement this Period 1.25  [MEMO ITEM] Memo Entry	002 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address P.O. Box 53155  City Phoenix State AZ Zip Code 85072-3155  Purpose of Disbursement Generic Cmte. Postage/Delivery Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862914 Date of Disbursement 04 / 22 / 2009  Amount of Each Disbursement this Period 61.00  See Attached Memo Entry
<b>B.</b>	Full Name (Last, First, Middle Initial) USPS  Mailing Address 2 Mass Ave. NE  City WASHINGTON State DC Zip Code 20002  Purpose of Disbursement Generic Cmte. Postage/Delivery Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862914-10000 Date of Disbursement 03 / 30 / 2009  Amount of Each Disbursement this Period 45.00  [MEMO ITEM] Memo Entry
<b>C.</b>	Full Name (Last, First, Middle Initial) USPS  Mailing Address 2 Mass Ave. NE  City WASHINGTON State DC Zip Code 20002  Purpose of Disbursement Generic Cmte. Postage/Delivery Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862914-20000 Date of Disbursement 03 / 30 / 2009  Amount of Each Disbursement this Period 16.00  [MEMO ITEM] Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	61.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address P.O. Box 53155  City Phoenix State AZ Zip Code 85072-3155  Purpose of Disbursement Generic Cmte. Catering Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862915 Date of Disbursement 04 / 22 / 2009  Amount of Each Disbursement this Period 150.72  See Attached Memo Entry
<b>B.</b>	Full Name (Last, First, Middle Initial) CORNER BAKERY  Mailing Address 12700 Park Central Dr. Suite 1  City DALLAS State TX Zip Code 75251  Purpose of Disbursement Generic Cmte. Catering Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862915-10000 Date of Disbursement 03 / 18 / 2009  Amount of Each Disbursement this Period 150.72  [MEMO ITEM] Memo Entry
<b>C.</b>	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address P.O. Box 53155  City Phoenix State AZ Zip Code 85072-3155  Purpose of Disbursement Generic Cmte. Events/Meetings Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862916 Date of Disbursement 04 / 22 / 2009  Amount of Each Disbursement this Period 116.33  See Attached Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	267.05
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) TELEFLORA.COM</p> <p>Mailing Address P.O. Box 60910</p> <p>City LOS ANGELES State CA Zip Code 90064</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862916-10000 <b>Date of Disbursement</b> 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 116.33</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Generic Cmte. Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862917 <b>Date of Disbursement</b> 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 161.73</p> <p>See Attached Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) FedEx Kinkos</p> <p>Mailing Address 715 D St. SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement Generic Cmte. Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862917-10000 <b>Date of Disbursement</b> 03 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 161.73</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	161.73
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address P.O. Box 53155  City Phoenix State AZ Zip Code 85072-3155  Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862918 Date of Disbursement 04 / 22 / 2009  Amount of Each Disbursement this Period 529.20  See Attached Memo Entry
<b>B.</b>	Full Name (Last, First, Middle Initial) UNITED AIR  Mailing Address P.O. Box 66100  City CHICAGO State IL Zip Code 60666  Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862918-10000 Date of Disbursement 03 / 06 / 2009  Amount of Each Disbursement this Period 219.60  [MEMO ITEM] Memo Entry
<b>C.</b>	Full Name (Last, First, Middle Initial) UNITED AIR  Mailing Address P.O. Box 66100  City CHICAGO State IL Zip Code 60666  Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862918-20000 Date of Disbursement 03 / 06 / 2009  Amount of Each Disbursement this Period 309.60  [MEMO ITEM] Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

529.20

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B-862919 Date of Disbursement
	Mailing Address P.O. Box 53155	<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2009"/>
	City Phoenix State AZ Zip Code 85072-3155	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel Candidate Name	<input type="text" value="72.35"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	See Attached Memo Entry
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) WASHINGTON FLYER TAXI	Transaction ID: SB21B-862919-10000 Date of Disbursement
	Mailing Address P.O. Box 17045	<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20041	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel Candidate Name	<input type="text" value="72.35"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] Memo Entry
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B-862920 Date of Disbursement
	Mailing Address P.O. Box 53155	<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2009"/>
	City Phoenix State AZ Zip Code 85072-3155	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel Candidate Name	<input type="text" value="2119.82"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	See Attached Memo Entry
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2192.17"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 349 / 551

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) USAIRWAYS</p> <p>Mailing Address 111 West Rio Salado Parkway</p> <p>City TEMPE State AZ Zip Code 85281</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862920-10000</p> <p><b>Date of Disbursement</b> 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 675.20</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) USAIRWAYS</p> <p>Mailing Address 111 West Rio Salado Parkway</p> <p>City TEMPE State AZ Zip Code 85281</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862920-20000</p> <p><b>Date of Disbursement</b> 03 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) USAIRWAYS</p> <p>Mailing Address 111 West Rio Salado Parkway</p> <p>City TEMPE State AZ Zip Code 85281</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862920-30000</p> <p><b>Date of Disbursement</b> 03 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 242.00</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 350 / 551

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) TELEFLORA.COM <hr/> Mailing Address P.O. Box 60910 <hr/> City LOS ANGELES State CA Zip Code 90064 Purpose of Disbursement Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862920-40000 Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2009
	Amount of Each Disbursement this Period 100.94
	<b>[MEMO ITEM]</b> Memo Entry
	Category/Type 002
<b>B.</b> Full Name (Last, First, Middle Initial) TELEFLORA.COM <hr/> Mailing Address P.O. Box 60910 <hr/> City LOS ANGELES State CA Zip Code 90064 Purpose of Disbursement Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862920-50000 Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2009
	Amount of Each Disbursement this Period 100.94
	<b>[MEMO ITEM]</b> Memo Entry
	Category/Type 002
<b>C.</b> Full Name (Last, First, Middle Initial) LOGAN INT'L <hr/> Mailing Address Logan International Airport <hr/> City BOSTON State MA Zip Code 02128 Purpose of Disbursement Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862920-60000 Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2009
	Amount of Each Disbursement this Period 6.12
	<b>[MEMO ITEM]</b> Memo Entry
	Category/Type 002

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 351 / 551

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) <b>USAIRWAYS</b></p> <p>Mailing Address 111 West Rio Salado Parkway</p> <p>City <b>TEMPE</b> State <b>AZ</b> Zip Code <b>85281</b></p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862920-70000 <b>Date of Disbursement</b> 03 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) <b>TAJ BOSTON FOOD</b></p> <p>Mailing Address 16 Arlington St.</p> <p>City <b>BOSTON</b> State <b>MA</b> Zip Code <b>02116</b></p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862920-80000 <b>Date of Disbursement</b> 03 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 58.51</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) <b>DELTA AIR</b></p> <p>Mailing Address 1030 Delta Boulevard</p> <p>City <b>ATLANTA</b> State <b>GA</b> Zip Code <b>30320</b></p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862920-90000 <b>Date of Disbursement</b> 03 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>DELTA AIR</b></p> <p>Mailing Address 1030 Delta Boulevard</p> <p>City ATLANTA State GA Zip Code 30320</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862920-100000</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="458.60"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>TAJ HOTELS INTERNATIONAL</b></p> <p>Mailing Address 15 Arlington St.</p> <p>City BOSTON State MA Zip Code 02116</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862920-110000</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="257.51"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>Bank of America</b></p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862921</p> <p>Date of Disbursement</p> <p><input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="779.74"/></p> <p>See Attached Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 354 / 551

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)  
LOEWS HOTELS THE REGENCY

Mailing Address 540 Park Avenue

City NEW YORK State NY Zip Code 10021

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B-862921-40000  
Date of Disbursement

03 / 19 / 2009

Amount of Each Disbursement this Period

-6.49

[MEMO ITEM]  
Memo Entry

B.

Full Name (Last, First, Middle Initial)  
Bank of America

Mailing Address P.O. Box 53155

City Phoenix State AZ Zip Code 85072-3155

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B-862922  
Date of Disbursement

04 / 22 / 2009

Amount of Each Disbursement this Period

107.65

See Attached Memo Entry

C.

Full Name (Last, First, Middle Initial)  
FOUR SEASONS HOTEL WA F&B

Mailing Address 2800 Pennsylvania Avenue NW

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B-862922-10000  
Date of Disbursement

03 / 19 / 2009

Amount of Each Disbursement this Period

75.70

[MEMO ITEM]  
Memo Entry

SUBTOTAL of Disbursements This Page (optional) ▶

107.65

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 355 / 551

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.**

Full Name (Last, First, Middle Initial)  
WASHINGTON COURT HTL F&B

Mailing Address 525 New Jersey Ave NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B-862922-20000  
Date of Disbursement

04 / 02 / 2009

Amount of Each Disbursement this Period

31.95

**[MEMO ITEM]**  
Memo Entry

**B.**

Full Name (Last, First, Middle Initial)  
Bank of America

Mailing Address P.O. Box 53155

City Phoenix State AZ Zip Code 85072-3155

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B-862923  
Date of Disbursement

04 / 22 / 2009

Amount of Each Disbursement this Period

612.19

See Attached Memo Entry

**C.**

Full Name (Last, First, Middle Initial)  
USAIRWAYS

Mailing Address 111 West Rio Salado Parkway

City Tempe State AZ Zip Code 85281

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B-862923-10000  
Date of Disbursement

03 / 10 / 2009

Amount of Each Disbursement this Period

579.20

**[MEMO ITEM]**  
Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

612.19

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 356 / 551

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) ORBITZ</p> <p>Mailing Address 500 West Madison Street Suite</p> <p>City Chicago State IL Zip Code 60661</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862923-20000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="6.99"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) WYNDHAM PHOENIX</p> <p>Mailing Address 50 E Adams St</p> <p>City Phoenix State AZ Zip Code 85004</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862923-30000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="26.00"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Generic Cmte. Postage/Delivery</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862924</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="253.00"/></p> <p>See Attached Memo Entry</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="253.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text" value=""/></p>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) USPS</p> <p>Mailing Address 475 L'Enfant Plaza SW</p> <p>City Washington State DC Zip Code 20260</p> <p>Purpose of Disbursement Generic Cmte. Postage/Delivery</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862924-10000 <b>Date of Disbursement</b> 03 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 253.00</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Generic Cmte. Research Materials</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862925 <b>Date of Disbursement</b> 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 291.84</p> <p>See Attached Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) DC GOV RECORDER OF DEEDS</p> <p>Mailing Address 515 D Street, NW</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Generic Cmte. Research Materials</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862925-10000 <b>Date of Disbursement</b> 03 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 4.00</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

291.84

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) DC GOV RECORDER OF DEEDS</p> <p>Mailing Address 515 D Street, NW</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Generic Cmte. Research Materials</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862925-20000 <b>Date of Disbursement</b> 03 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 48.00</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) DC GOV RECORDER OF DEEDS</p> <p>Mailing Address 515 D Street, NW</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Generic Cmte. Research Materials</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862925-30000 <b>Date of Disbursement</b> 03 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) DC GOV RECORDER OF DEEDS</p> <p>Mailing Address 515 D Street, NW</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Generic Cmte. Research Materials</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862925-40000 <b>Date of Disbursement</b> 03 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 16.00</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) DC GOV RECORDER OF DEEDS</p> <p>Mailing Address 515 D Street, NW</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Generic Cmte. Research Materials</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862925-50000</p> <p>Date of Disbursement 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 16.00</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) DC GOV RECORDER OF DEEDS</p> <p>Mailing Address 515 D Street, NW</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Generic Cmte. Research Materials</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862925-60000</p> <p>Date of Disbursement 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 12.00</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) HEALTH GRADES, INC.</p> <p>Mailing Address 500 Golden Ridge Rd # 100</p> <p>City Golden State CO Zip Code 80401</p> <p>Purpose of Disbursement Generic Cmte. Research Materials</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862925-70000</p> <p>Date of Disbursement 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 9.95</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>0.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) DC GOV RECORDER OF DEEDS</p> <p>Mailing Address 515 D Street, NW</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Generic Cmte. Research Materials</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862925-80000 <b>Date of Disbursement:</b> MM / DD / YYYY 03 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 16.00</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) PROTITLEUSA</p> <p>Mailing Address PO Box 52328</p> <p>City Philadelphia State PA Zip Code 19053</p> <p>Purpose of Disbursement Generic Cmte. Research Materials</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862925-90000 <b>Date of Disbursement:</b> MM / DD / YYYY 03 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 137.95</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Amazon Payments</p> <p>Mailing Address 1200 12th Avenue, Suite 1200</p> <p>City Seattle State WA Zip Code 98144</p> <p>Purpose of Disbursement Generic Cmte. Research Materials</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862925-100000 <b>Date of Disbursement:</b> MM / DD / YYYY 03 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 11.94</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address P.O. Box 53155  City Phoenix State AZ Zip Code 85072-3155  Purpose of Disbursement Subscriptions Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862926 Date of Disbursement 04 / 22 / 2009  Amount of Each Disbursement this Period 399.00  See Attached Memo Entry
B.	Full Name (Last, First, Middle Initial) NEWSLIBRARY.COM ARTICL  Mailing Address 397 Main St. PO Box 219  City Chester State VT Zip Code 05143  Purpose of Disbursement Subscriptions Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862926-10000 Date of Disbursement 03 / 12 / 2009  Amount of Each Disbursement this Period 399.00  [MEMO ITEM] Memo Entry
C.	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address P.O. Box 53155  City Phoenix State AZ Zip Code 85072-3155  Purpose of Disbursement Wire Services On Line Svcs. Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862927 Date of Disbursement 04 / 22 / 2009  Amount of Each Disbursement this Period 5.99  See Attached Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	404.99
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) TMOBILE HOTSPOT</p> <p>Mailing Address PO Box 37380</p> <p>City Albuquerque State NM Zip Code 87176</p> <p>Purpose of Disbursement Wire Services On Line Svcs. Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862927-10000 <b>Date of Disbursement</b> 04 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 5.99</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Generic Cmte. Printing Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862928 <b>Date of Disbursement</b> 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 25.31</p> <p>See Attached Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) FedEx Kinkos</p> <p>Mailing Address 1218 N Monroe Street</p> <p>City TALLAHASSEE State FL Zip Code 32303</p> <p>Purpose of Disbursement Generic Cmte. Printing Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862928-10000 <b>Date of Disbursement</b> 04 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 25.31</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

25.31

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address P.O. Box 53155  City Phoenix State AZ Zip Code 85072-3155  Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862929 Date of Disbursement 04 / 22 / 2009  Amount of Each Disbursement this Period 261.01  See Attached Memo Entry	
<b>B.</b>	Full Name (Last, First, Middle Initial) APPLEBEES  Mailing Address 1355 Apalachee Parkway  City TALLAHASSEE State FL Zip Code 32301  Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862929-10000 Date of Disbursement 04 / 02 / 2009  Amount of Each Disbursement this Period 15.66  [MEMO ITEM] Memo Entry	
<b>C.</b>	Full Name (Last, First, Middle Initial) SPEEDWAY GRILL  Mailing Address 5501 Josh Birmingham Parkway  City CHARLOTTE State NC Zip Code 28208  Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862929-20000 Date of Disbursement 04 / 02 / 2009  Amount of Each Disbursement this Period 8.65  [MEMO ITEM] Memo Entry	

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

261.01

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 364 / 551

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) USAIRWAYS</p> <p>Mailing Address 4000 E Sky Harbor Blvd</p> <p>City Phoenix State AZ Zip Code 85034</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862929-30000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">15.00</td> </tr> </table> <p><b>[MEMO ITEM]</b> Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	0	2	/	2	0	0	9	15.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	4	/	0	2	/	2	0	0	9													
15.00																						
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) GORDON BIRSCH</p> <p>Mailing Address National Airport</p> <p>City WASHINGTON State DC Zip Code 20001</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862929-40000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">20.67</td> </tr> </table> <p><b>[MEMO ITEM]</b> Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	0	2	/	2	0	0	9	20.67
M	M	/	D	D	/	Y	Y	Y	Y													
0	4	/	0	2	/	2	0	0	9													
20.67																						
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) CABO'S ISLAND GRILL</p> <p>Mailing Address 1221 Apalachee Parkway</p> <p>City TALLAHASSEE State FL Zip Code 32301</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862929-50000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">26.48</td> </tr> </table> <p><b>[MEMO ITEM]</b> Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	0	2	/	2	0	0	9	26.48
M	M	/	D	D	/	Y	Y	Y	Y													
0	4	/	0	2	/	2	0	0	9													
26.48																						

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 365 / 551

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) APPLEBEES</p> <p>Mailing Address 1355 Apalachee Parkway</p> <p>City TALLAHASSEE State FL Zip Code 32301</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB21B-862929-60000</p> <p><b>Date of Disbursement</b> 04 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 20.02</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) ALAMO RENT-A-CAR</p> <p>Mailing Address 3300 Capital Cir SW</p> <p>City TALLAHASSEE State FL Zip Code 32310</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB21B-862929-70000</p> <p><b>Date of Disbursement</b> 04 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 154.53</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB21B-862930</p> <p><b>Date of Disbursement</b> 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 1232.32</p> <p>See Attached Memo Entry</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1232.32</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) SOUTHWESTAIR</p> <p>Mailing Address P.O. Box 36647 - 1CR</p> <p>City DALLAS State TX Zip Code 75235</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862930-10000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="213.70"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) SOUTHWESTAIR</p> <p>Mailing Address P.O. Box 36647 - 1CR</p> <p>City DALLAS State TX Zip Code 75235</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862930-20000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="213.70"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) 14TH STREET BP</p> <p>Mailing Address 2600 14th Street</p> <p>City WASHINGTON State DC Zip Code 20009</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862930-30000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="32.86"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="0.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 367 / 551

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>CALIFORNIA TORTILLA</b></p> <p>Mailing Address 7727 Tuckerman Ln</p> <p>City POTOMAC State MD Zip Code 20854</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862930-40000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="11.32"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>DUNKIN</b></p> <p>Mailing Address 713 Upper Glen St</p> <p>City QUEENSBURY State NY Zip Code 12804</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862930-50000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="14.53"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>HALFMOON SALAD AND SANDWICH</b></p> <p>Mailing Address 1615 Route 9</p> <p>City Clifton Park State NY Zip Code 12065</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862930-60000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="16.91"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 368 / 551

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>STEWARTS SHOP</b></p> <p>Mailing Address 402 Bay Rd</p> <p>City QUEENSBURY State NY Zip Code 12801</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862930-70000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.18"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>DAVIDSON BROTHERS</b></p> <p>Mailing Address 184 Glen Street</p> <p>City Glen falls State NY Zip Code 12801</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862930-80000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="48.16"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>LOX OF BAGELS &amp; MOOR</b></p> <p>Mailing Address 89 1 2 Main Street</p> <p>City QUEENSBURY State NY Zip Code 12804</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862930-90000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="17.44"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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PAGE 369 / 551

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) RIDGE STREET COFFEE</p> <p>Mailing Address 1 Ridge Street</p> <p>City GLEN FALLS State NY Zip Code 12804</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862930-100000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">11.84</td> </tr> </table> <p><b>[MEMO ITEM]</b> Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	0	9	11.84
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		3	1		2	0	0	9													
11.84																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) DNCP&amp;R GIDEON PUTM CT RSV</p> <p>Mailing Address 24 Gideon Putnam Road</p> <p>City Saratoga Springs State NY Zip Code 12866</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862930-110000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">132.67</td> </tr> </table> <p><b>[MEMO ITEM]</b> Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	0	9	132.67
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		3	1		2	0	0	9													
132.67																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) PRICELINE.COM HTL</p> <p>Mailing Address 800 Connecticut Ave # 8</p> <p>City Norwalk State CT Zip Code 06854</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862930-120000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">407.12</td> </tr> </table> <p><b>[MEMO ITEM]</b> Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	0	9	407.12
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		3	1		2	0	0	9													
407.12																						

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 370 / 551

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) STARBUCKS USA</p> <p>Mailing Address 351 Broadway</p> <p>City Saratoga Springs State NY Zip Code 12866</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862930-130000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">15.89</td> </tr> </table> <p><b>[MEMO ITEM]</b> Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	0	2	/	2	0	0	9	15.89
M	M	/	D	D	/	Y	Y	Y	Y													
0	4	/	0	2	/	2	0	0	9													
15.89																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) CIRCUS CAFE</p> <p>Mailing Address 392 Broadway</p> <p>City Saratoga Springs State NY Zip Code 12866</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862930-140000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">48.00</td> </tr> </table> <p><b>[MEMO ITEM]</b> Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	0	2	/	2	0	0	9	48.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	4	/	0	2	/	2	0	0	9													
48.00																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) THE CASCADES</p> <p>Mailing Address 407 Warren Street</p> <p>City Hudson State NY Zip Code 12534</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862930-150000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">23.00</td> </tr> </table> <p><b>[MEMO ITEM]</b> Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	0	3	/	2	0	0	9	23.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	4	/	0	3	/	2	0	0	9													
23.00																						

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00
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**TOTAL** This Period (last page this line number only) ..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862931</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center; border: 1px solid black; padding: 5px;">1415.41</p> <p>See Attached Memo Entry</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) CATO TRAVEL</p> <p>Mailing Address 1 C St.</p> <p>City WASHINGTON State DC Zip Code 20515</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862931-10000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center; border: 1px solid black; padding: 5px;">25.00</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) CATO TRAVEL</p> <p>Mailing Address 1 C St.</p> <p>City WASHINGTON State DC Zip Code 20515</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862931-20000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center; border: 1px solid black; padding: 5px;">25.00</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1415.41

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) EXXONMOBIL</p> <p>Mailing Address 1800 Wilson Boulevard</p> <p>City ARLINGTON State VA Zip Code 22201</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862931-30000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="27.00"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) DELTA AIR</p> <p>Mailing Address 1030 Delta Boulevard</p> <p>City Atlanta State GA Zip Code 30320</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862931-40000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="679.21"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) DELTA AIR</p> <p>Mailing Address 1030 Delta Boulevard</p> <p>City Atlanta State GA Zip Code 30320</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862931-50000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="659.20"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address P.O. Box 53155  City Phoenix State AZ Zip Code 85072-3155  Purpose of Disbursement Seminar/ Staff Training Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862932 Date of Disbursement 04 / 22 / 2009  Amount of Each Disbursement this Period 1190.00  See Attached Memo Entry
<b>B.</b>	Full Name (Last, First, Middle Initial) IPDI  Mailing Address Ronald Reagan Bulding, 1300 Pe  City Washington State DC Zip Code 20004  Purpose of Disbursement Seminar/ Staff Training Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862932-10000 Date of Disbursement 03 / 12 / 2009  Amount of Each Disbursement this Period 1190.00  [MEMO ITEM] Memo Entry
<b>C.</b>	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address P.O. Box 53155  City Phoenix State AZ Zip Code 85072-3155  Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862933 Date of Disbursement 04 / 22 / 2009  Amount of Each Disbursement this Period 116.76  See Attached Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1306.76

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Hawk N Dove Restaurant</p> <p>Mailing Address 329 Pennsylvania Ave SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862933-10000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="116.76"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Wire Services On Line Svcs.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862934</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="180.84"/></p> <p>See Attached Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) ONE WORLD HOSTING</p> <p>Mailing Address P.O. Box 880</p> <p>City Worthington State OH Zip Code 43085</p> <p>Purpose of Disbursement Wire Services On Line Svcs.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862934-10000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="9.95"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) GODADDY.COM</p> <p>Mailing Address 14455 N. Hayden Road Suite 219</p> <p>City Scottsdale State AZ Zip Code 85260</p> <p>Purpose of Disbursement Wire Services On Line Svcs. Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862934-20000 <b>Date of Disbursement:</b> 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period: 32.67</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) GODADDY.COM</p> <p>Mailing Address 14455 N. Hayden Road Suite 219</p> <p>City Scottsdale State AZ Zip Code 85260</p> <p>Purpose of Disbursement Wire Services On Line Svcs. Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862934-30000 <b>Date of Disbursement:</b> 03 / 16 / 2009</p> <p>Amount of Each Disbursement this Period: 38.02</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) GODADDY.COM</p> <p>Mailing Address 14455 N. Hayden Road Suite 219</p> <p>City Scottsdale State AZ Zip Code 85260</p> <p>Purpose of Disbursement Wire Services On Line Svcs. Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862934-40000 <b>Date of Disbursement:</b> 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period: 100.20</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 376 / 551

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address P.O. Box 53155  City Phoenix State AZ Zip Code 85072-3155 Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862936 Date of Disbursement 04 / 22 / 2009  Amount of Each Disbursement this Period 277.56  See Attached Memo Entry	
<b>B.</b>	Full Name (Last, First, Middle Initial) ALBANY AIRPORT LLC  Mailing Address Albany Int'L Arpt, 737 Albany-  City ALBANY State NY Zip Code 12211 Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862936-10000 Date of Disbursement 03 / 18 / 2009  Amount of Each Disbursement this Period 12.33  [MEMO ITEM] Memo Entry	
<b>C.</b>	Full Name (Last, First, Middle Initial) ROCKHILL BAKEHOUSE  Mailing Address 19 Exchange St  City GLENS FALLS State NY Zip Code 12801 Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862936-20000 Date of Disbursement 03 / 18 / 2009  Amount of Each Disbursement this Period 20.00  [MEMO ITEM] Memo Entry	

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

277.56

**TOTAL** This Period (last page this line number only) ..... ▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) QUEENSBURY HOTEL</p> <p>Mailing Address 88 Ridge Street</p> <p>City GLENS FALLS State NY Zip Code 12801</p> <p>Purpose of Disbursement Travel Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862936-60000 <b>Date of Disbursement</b> 03 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 197.58</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862937 <b>Date of Disbursement</b> 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 125.93</p> <p>See Attached Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) ROSEBOWL FLORIST</p> <p>Mailing Address 601 Van Ness</p> <p>City San Francisco State CA Zip Code 94102</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862937-10000 <b>Date of Disbursement</b> 03 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 125.93</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

125.93

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address P.O. Box 53155  City Phoenix State AZ Zip Code 85072-3155  Purpose of Disbursement Generic Cmte. Postage/Delivery Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862938 Date of Disbursement 04 / 22 / 2009  Amount of Each Disbursement this Period 840.00  See Attached Memo Entry	001 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) USPS  Mailing Address Longworth HOB  City WASHINGTON State DC Zip Code 20515  Purpose of Disbursement Generic Cmte. Postage/Delivery Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862938-10000 Date of Disbursement 04 / 01 / 2009  Amount of Each Disbursement this Period 630.00  [MEMO ITEM] Memo Entry	001 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) USPS  Mailing Address Longworth HOB  City WASHINGTON State DC Zip Code 20515  Purpose of Disbursement Generic Cmte. Postage/Delivery Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862938-20000 Date of Disbursement 04 / 03 / 2009  Amount of Each Disbursement this Period 210.00  [MEMO ITEM] Memo Entry	001 Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

840.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Bank of America <hr/> Mailing Address P.O. Box 53155 <hr/> City Phoenix State AZ Zip Code 85072-3155 Purpose of Disbursement Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862939 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 538.38
	See Attached Memo Entry
	Category/Type 002
<b>B.</b> Full Name (Last, First, Middle Initial) Hotels.com <hr/> Mailing Address 3150 139th Ave SE <hr/> City Bellevue State WA Zip Code 98085 Purpose of Disbursement Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862939-10000 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 9
	Amount of Each Disbursement this Period 448.65
	[MEMO ITEM] Memo Entry
	Category/Type 002
<b>C.</b> Full Name (Last, First, Middle Initial) SOFIA HOTEL <hr/> Mailing Address 150 West Broadway <hr/> City SAN DIEGO State CA Zip Code 92101 Purpose of Disbursement Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862939-20000 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 9
	Amount of Each Disbursement this Period 100.00
	[MEMO ITEM] Memo Entry
	Category/Type 002

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

538.38

**TOTAL** This Period (last page this line number only) ..... ▶





**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) UNITED AIR</p> <p>Mailing Address P.O. Box 66100</p> <p>City Chicago State IL Zip Code 60666</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862940-10000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">389.20</td> </tr> </table> <p><b>[MEMO ITEM]</b> Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	6		2	0	0	9	389.20
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	6		2	0	0	9													
389.20																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) COFFEE BEAN</p> <p>Mailing Address 160 West Broadway</p> <p>City SAN DIEGO State CA Zip Code 92101</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862940-20000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">6.25</td> </tr> </table> <p><b>[MEMO ITEM]</b> Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	3		2	0	0	9	6.25
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	3		2	0	0	9													
6.25																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) PEETS COFFEE/TEA</p> <p>Mailing Address 11750 San Vicente Blvd</p> <p>City LOS ANGELES State CA Zip Code 90049</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862940-30000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">8.75</td> </tr> </table> <p><b>[MEMO ITEM]</b> Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	9	8.75
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	4		2	0	0	9													
8.75																						

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) HOTEL PALOMAR LAWESTWOOD  Mailing Address 10740 Wilshire Blvd.  City LOS ANGELES State CA Zip Code 90024  Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862940-40000 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 9  Amount of Each Disbursement this Period 208.62  <b>[MEMO ITEM]</b> Memo Entry	
<b>B.</b>	Full Name (Last, First, Middle Initial) HOTEL PALOMAR LAWESTWOOD  Mailing Address 10740 Wilshire Blvd.  City LOS ANGELES State CA Zip Code 90024  Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862940-50000 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 9  Amount of Each Disbursement this Period 265.77  <b>[MEMO ITEM]</b> Memo Entry	
<b>C.</b>	Full Name (Last, First, Middle Initial) HOTEL PALOMAR LAWESTWOOD  Mailing Address 10740 Wilshire Blvd.  City LOS ANGELES State CA Zip Code 90024  Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862940-60000 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 9  Amount of Each Disbursement this Period 215.55  <b>[MEMO ITEM]</b> Memo Entry	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<b>0.00</b>	
<b>TOTAL</b> This Period (last page this line number only) .....			



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address P.O. Box 53155  City Phoenix State AZ Zip Code 85072-3155 Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862941 Date of Disbursement 04 / 22 / 2009  Amount of Each Disbursement this Period 467.20  See Attached Memo Entry	
<b>B.</b>	Full Name (Last, First, Middle Initial) UNITED AIR  Mailing Address P.O. Box 66100  City Chicago State IL Zip Code 60666 Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862941-10000 Date of Disbursement 03 / 06 / 2009  Amount of Each Disbursement this Period 399.80  [MEMO ITEM] Memo Entry	
<b>C.</b>	Full Name (Last, First, Middle Initial) DULLES AIRPORT TAXI  Mailing Address P.O. Box 17045  City Washington State DC Zip Code 20041 Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862941-20000 Date of Disbursement 03 / 25 / 2009  Amount of Each Disbursement this Period 67.40  [MEMO ITEM] Memo Entry	

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

467.20

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address P.O. Box 53155  City Phoenix State AZ Zip Code 85072-3155 Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862942 Date of Disbursement 04 / 22 / 2009  Amount of Each Disbursement this Period 687.42  See Attached Memo Entry
<b>B.</b>	Full Name (Last, First, Middle Initial) VIRGIN AMERICA  Mailing Address 555 Airport Blvd # 200,  City BURLINGAME State CA Zip Code 94010 Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862942-10000 Date of Disbursement 04 / 01 / 2009  Amount of Each Disbursement this Period 379.20  [MEMO ITEM] Memo Entry
<b>C.</b>	Full Name (Last, First, Middle Initial) Hotels.com  Mailing Address 3150 139th Ave SE  City Bellevue State WA Zip Code 75231 Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862942-20000 Date of Disbursement 04 / 01 / 2009  Amount of Each Disbursement this Period 138.22  [MEMO ITEM] Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	687.42
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) VIRGIN AMERICA</p> <p>Mailing Address 555 Airport Blvd # 200,</p> <p>City BURLINGAME State CA Zip Code 94010</p> <p>Purpose of Disbursement Travel Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862942-30000 <b>Date of Disbursement</b> 04 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 170.00</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Travel Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862943 <b>Date of Disbursement</b> 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 150.56</p> <p>See Attached Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) EXXONMOBIL</p> <p>Mailing Address 339 Pennsylvania Ave, SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement Travel Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862943-10000 <b>Date of Disbursement</b> 03 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 24.18</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	150.56
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) SUNOCO SVC STATION</p> <p>Mailing Address 8500 Connecticut Ave.</p> <p>City CHEVY CHASE State MD Zip Code 20815</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862943-20000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">21.96</td> </tr> </table> <p><b>[MEMO ITEM]</b> Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	21.96
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
21.96																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) SHELL OIL</p> <p>Mailing Address 10515 Connecticut Ave.</p> <p>City KENSINGTON State MD Zip Code 20895</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862943-30000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">19.49</td> </tr> </table> <p><b>[MEMO ITEM]</b> Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	8		2	0	0	9	19.49
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	8		2	0	0	9													
19.49																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) SUNOCO SVC STATION</p> <p>Mailing Address 8500 Connecticut Ave.</p> <p>City CHEVY CHASE State MD Zip Code 20815</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862943-40000</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">18.08</td> </tr> </table> <p><b>[MEMO ITEM]</b> Memo Entry</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	3		2	0	0	9	18.08
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	3		2	0	0	9													
18.08																						

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) SUNOCO SVC STATION</p> <p>Mailing Address 8500 Connecticut Ave.</p> <p>City CHEVY CHASE State MD Zip Code 20815</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862943-50000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="23.21"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) SUNOCO SVC STATION</p> <p>Mailing Address 8500 Connecticut Ave.</p> <p>City CHEVY CHASE State MD Zip Code 20815</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862943-60000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="12.44"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) SUBWAY</p> <p>Mailing Address 406 1st Street SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862943-70000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5.50"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>SUBWAY</b></p> <p>Mailing Address 406 1st Street SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862943-80000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5.50"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>SUNOCO SVC STATION</b></p> <p>Mailing Address 8500 Connecticut Ave.</p> <p>City CHEVY CHASE State MD Zip Code 20815</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862943-90000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="20.20"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>Bank of America</b></p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Generic Cmte. Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862984</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="145.48"/></p> <p>See Attached Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) FOUR SEASONS HOTEL WA F&amp;B</p> <p>Mailing Address 2800 Pennsylvania Avenue NW</p> <p>City WASHINGTON State DC Zip Code 20007</p> <p>Purpose of Disbursement Generic Cmte. Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862984-10000</p> <p>Date of Disbursement MM / DD / YYYY 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 145.48</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Generic Cmte. Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862985</p> <p>Date of Disbursement MM / DD / YYYY 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 886.56</p> <p>See Attached Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) FOUR SEASONS HOTEL WA F&amp;B</p> <p>Mailing Address 2800 Pennsylvania Avenue NW</p> <p>City WASHINGTON State DC Zip Code 20007</p> <p>Purpose of Disbursement Generic Cmte. Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862985-10000</p> <p>Date of Disbursement MM / DD / YYYY 03 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 886.56</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	886.56
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address P.O. Box 53155  City Phoenix State AZ Zip Code 85072-3155  Purpose of Disbursement Generic Cmte. Events/Meetings Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862986 Date of Disbursement 04 / 22 / 2009  Amount of Each Disbursement this Period 1325.96  See Attached Memo Entry
<b>B.</b>	Full Name (Last, First, Middle Initial) CONGRESSIONAL LIQUORS  Mailing Address 404 1st Street, SE  City WASHINGTON State DC Zip Code 20003  Purpose of Disbursement Generic Cmte. Events/Meetings Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862986-10000 Date of Disbursement 03 / 24 / 2009  Amount of Each Disbursement this Period 287.41  [MEMO ITEM] Memo Entry
<b>C.</b>	Full Name (Last, First, Middle Initial) Bergmann's Cleaning INC  Mailing Address 44991 Falcon Place  City Sterling State VA Zip Code 20166  Purpose of Disbursement Generic Cmte. Events/Meetings Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862986-20000 Date of Disbursement 03 / 30 / 2009  Amount of Each Disbursement this Period 88.55  [MEMO ITEM] Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1325.96
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) CHARLIE PALMER STEAK</p> <p>Mailing Address 101 Constitution Ave</p> <p>City WASHINGTON State DC Zip Code 20001</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862986-30000 <b>Date of Disbursement</b> 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 950.00</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862987 <b>Date of Disbursement</b> 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 3200.00</p> <p>See Attached Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) EASTCOAST GRILL CATERING</p> <p>Mailing Address 1271 Cambridge Street</p> <p>City CAMBRIDGE State MA Zip Code 02139</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862987-10000 <b>Date of Disbursement</b> 03 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 3200.00</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3200.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862988</p> <p>Date of Disbursement 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 5139.06</p> <p>See Attached Memo Entry</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) TELEFLORA.COM</p> <p>Mailing Address 51 Beach Street</p> <p>City NEW YORK State NY Zip Code 10013</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862988-10000</p> <p>Date of Disbursement 03 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 1235.48</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) FedEx Kinkos</p> <p>Mailing Address 16 E 52nd Street</p> <p>City NEW YORK State NY Zip Code 10022</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862988-20000</p> <p>Date of Disbursement 03 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 93.10</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5139.06
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>UNION STATION PARKING</b></p> <p>Mailing Address 60 Massachusetts Avenue, NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862988-30000 <b>Date of Disbursement</b> 03 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 32.00</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>PARTY RENTAL LTD</b></p> <p>Mailing Address 22 E 72ND St</p> <p>City NEW YORK State NY Zip Code 10021</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862988-40000 <b>Date of Disbursement</b> 03 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 146.43</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>PARTY RENTAL LTD</b></p> <p>Mailing Address 22 E 72ND St</p> <p>City NEW YORK State NY Zip Code 10021</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862988-50000 <b>Date of Disbursement</b> 03 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 3632.05</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address P.O. Box 53155  City Phoenix State AZ Zip Code 85072-3155  Purpose of Disbursement Generic Cmte. Supplies Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-862989 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 9	Amount of Each Disbursement this Period  1.05
			See Attached Memo Entry
<b>B.</b>	Full Name (Last, First, Middle Initial) APL ITUNES  Mailing Address 1 Infinite Loop  City Cupertino State CA Zip Code 95014  Purpose of Disbursement Generic Cmte. Supplies Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-862989-10000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 9	Amount of Each Disbursement this Period  1.05
			[MEMO ITEM] Memo Entry
<b>C.</b>	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address P.O. Box 53155  City Phoenix State AZ Zip Code 85072-3155  Purpose of Disbursement Generic Cmte. Supplies Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-862990 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 9	Amount of Each Disbursement this Period  4166.31
			See Attached Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**4167.36**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) ATLANTIC CITY INSTRUMENT</p> <p>Mailing Address 6677 Black Horse Pike</p> <p>City Egg Harbor State NJ Zip Code 08234</p> <p>Purpose of Disbursement Generic Cmte. Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862990-10000</p> <p>Date of Disbursement MM / DD / YYYY 03 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 4166.31</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862991</p> <p>Date of Disbursement MM / DD / YYYY 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 523.68</p> <p>See Attached Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) AMTRAK .COM</p> <p>Mailing Address 60 Massachusetts Avenue, NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862991-10000</p> <p>Date of Disbursement MM / DD / YYYY 03 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 288.00</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	523.68
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) BISTRO CAFE</p> <p>Mailing Address 320 Park Ave</p> <p>City NEW YORK State NY Zip Code 10022</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862991-20000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="31.68"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) NYC TAXI</p> <p>Mailing Address 303 9th Ave</p> <p>City NEW YORK State NY Zip Code 10001</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862991-30000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="13.30"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) NYC TAXI</p> <p>Mailing Address 303 9th Ave</p> <p>City NEW YORK State NY Zip Code 10001</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862991-40000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="12.10"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="0.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text" value=""/></p>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) AFFINIA FIFTY</p> <p>Mailing Address 155 East 50th Street</p> <p>City NEW YORK State NY Zip Code 10022</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862991-50000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="120.61"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) AFFINIA FIFTY</p> <p>Mailing Address 155 East 50th Street</p> <p>City NEW YORK State NY Zip Code 10022</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862991-60000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="8.67"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) AU BON PAIN #125 CAFE</p> <p>Mailing Address 60 Massachusetts Avenue, NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862991-70000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="16.46"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) PRIMO CAPPUCCINO</p> <p>Mailing Address Penn Station</p> <p>City NEW YORK State NY Zip Code 10119</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862991-80000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="10.86"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) AMTRAK</p> <p>Mailing Address 60 Massachusetts Avenue, NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862991-90000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="22.00"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Generic Cmte. Postage/Delivery</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862992</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="98.00"/></p> <p>See Attached Memo Entry</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="98.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) USPS</p> <p>Mailing Address B-202 Longworth HOB</p> <p>City WASHINGTON State DC Zip Code 20515</p> <p>Purpose of Disbursement Generic Cmte. Postage/Delivery</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862992-10000</p> <p>Date of Disbursement 04 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 98.00</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Generic Cmte. Postage/Delivery</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862993</p> <p>Date of Disbursement 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 98.00</p> <p>See Attached Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) USPS</p> <p>Mailing Address B-202 Longworth HOB</p> <p>City WASHINGTON State DC Zip Code 20515</p> <p>Purpose of Disbursement Generic Cmte. Postage/Delivery</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862993-10000</p> <p>Date of Disbursement 04 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 98.00</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	98.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B-862994 Date of Disbursement 04 / 22 / 2009
	Mailing Address P.O. Box 53155	Amount of Each Disbursement this Period 98.00
	City Phoenix State AZ Zip Code 85072-3155	
	Purpose of Disbursement Generic Cmte. Postage/Delivery	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	See Attached Memo Entry
	State: District:	

B.	Full Name (Last, First, Middle Initial) USPS	Transaction ID: SB21B-862994-10000 Date of Disbursement 04 / 03 / 2009
	Mailing Address B-202 Longworth HOB	Amount of Each Disbursement this Period 98.00
	City WASHINGTON State DC Zip Code 20515	
	Purpose of Disbursement Generic Cmte. Postage/Delivery	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Memo Entry
	State: District:	

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B-862995 Date of Disbursement 04 / 22 / 2009
	Mailing Address P.O. Box 53155	Amount of Each Disbursement this Period 10.27
	City Phoenix State AZ Zip Code 85072-3155	
	Purpose of Disbursement Wire Services On Line Svcs.	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	See Attached Memo Entry
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	108.27
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) BWI BOINGO WIRELESS</p> <p>Mailing Address 10960 Wilshire Boulevard</p> <p>City Los Angeles State CA Zip Code 90404</p> <p>Purpose of Disbursement Wire Services On Line Svcs.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862995-10000</p> <p>Date of Disbursement MM / DD / YYYY 03 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 10.27</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Generic Cmte. Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862996</p> <p>Date of Disbursement MM / DD / YYYY 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 229.69</p> <p>See Attached Memo Entry</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) WWW.NEWEGG.COM</p> <p>Mailing Address 9997 E. Rose Hills Road</p> <p>City Whittier State CA Zip Code 90601</p> <p>Purpose of Disbursement Generic Cmte. Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862996-10000</p> <p>Date of Disbursement MM / DD / YYYY 03 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 24.99</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

229.69

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) PROVANTAGE CORP	Transaction ID: SB21B-862996-20000 Date of Disbursement 03 / 18 / 2009
	Mailing Address 7249 Whipple Avenue NW	Amount of Each Disbursement this Period 182.71
	City North Canton State OH Zip Code 44720	
	Purpose of Disbursement Generic Cmte. Supplies	[MEMO ITEM] Memo Entry
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) WWW.NEWEGG.COM	Transaction ID: SB21B-862996-30000 Date of Disbursement 03 / 20 / 2009
	Mailing Address 9997 E. Rose Hills Road	Amount of Each Disbursement this Period 21.99
	City Whittier State CA Zip Code 90601	
	Purpose of Disbursement Generic Cmte. Supplies	[MEMO ITEM] Memo Entry
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B-862997 Date of Disbursement 04 / 22 / 2009
	Mailing Address P.O. Box 53155	Amount of Each Disbursement this Period 12.00
	City Phoenix State AZ Zip Code 85072-3155	
	Purpose of Disbursement Travel	002 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	See Attached Memo Entry
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	12.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>UNION STATION PARKING</b></p> <p>Mailing Address 50 Massachusetts Ave NE</p> <p>City WASHINGTON State DC Zip Code 20004</p> <p>Purpose of Disbursement Travel Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862997-10000 <b>Date of Disbursement</b> 03 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 12.00</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>Bank of America</b></p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862998 <b>Date of Disbursement</b> 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 49.95</p> <p>See Attached Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>PLAXO</b></p> <p>Mailing Address 203 Ravendale Dr</p> <p>City Mountain View State CA Zip Code 94043</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862998-10000 <b>Date of Disbursement</b> 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 49.95</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

49.95

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address P.O. Box 53155  City Phoenix State AZ Zip Code 85072-3155  Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862999 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 9	Amount of Each Disbursement this Period 8103.33  See Attached Memo Entry
<b>B.</b>	Full Name (Last, First, Middle Initial) THE SOURCE  Mailing Address 575 Pennsylvania Ave, NW  City WASHINGTON State DC Zip Code 20004  Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862999-10000 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 9	Amount of Each Disbursement this Period 386.20  [MEMO ITEM] Memo Entry
<b>C.</b>	Full Name (Last, First, Middle Initial) THE SOURCE  Mailing Address 575 Pennsylvania Ave, NW  City WASHINGTON State DC Zip Code 20004  Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-862999-20000 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 9	Amount of Each Disbursement this Period 52.00  [MEMO ITEM] Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

8103.33

**TOTAL** This Period (last page this line number only) ..... ▶





# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) LOEWS HOTELS THE REGENCY</p> <p>Mailing Address 540 Park Ave</p> <p>City NEW YORK State NY Zip Code 10021</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862999-90000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="49.85"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) LOEWS HOTELS THE REGENCY</p> <p>Mailing Address 540 Park Ave</p> <p>City NEW YORK State NY Zip Code 10021</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862999-100000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1286.49"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) USAIRWAYS</p> <p>Mailing Address 201 E Jefferson St</p> <p>City PHOENIX State AZ Zip Code 85034</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862999-110000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="-510.60"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) AWEA</p> <p>Mailing Address 1501 M St NW # 1000</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862999-120000</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) AWEA</p> <p>Mailing Address 1501 M St NW # 1000</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862999-130000</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1500.00"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) AMERICAN AIR</p> <p>Mailing Address 3800 N Mingo Rd</p> <p>City Tulsa State OK Zip Code 74063</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862999-140000</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="304.20"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) USAIRWAYS</p> <p>Mailing Address 201 E Jefferson St</p> <p>City PHOENIX State AZ Zip Code 85034</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862999-180000</p> <p><b>Date of Disbursement</b> 03 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 717.60</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) USAIRWAYS</p> <p>Mailing Address 201 E Jefferson St</p> <p>City PHOENIX State AZ Zip Code 85034</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862999-190000</p> <p><b>Date of Disbursement</b> 03 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) AMERICAN AIR</p> <p>Mailing Address 3800 N Mingo Rd</p> <p>City Tulsa State OK Zip Code 74063</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862999-200000</p> <p><b>Date of Disbursement</b> 03 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 659.60</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) DELTA AIR</p> <p>Mailing Address 2 Capitol Sq SW</p> <p>City ATLANTA State GA Zip Code 30320</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862999-210000</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="458.60"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) DELTA AIR</p> <p>Mailing Address 2 Capitol Sq SW</p> <p>City ATLANTA State GA Zip Code 30320</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862999-220000</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="20.00"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) TAJ HOTELS INTERNATIONAL</p> <p>Mailing Address 15 Arlington Stree</p> <p>City BOSTON State MA Zip Code 02116</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-862999-230000</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="257.51"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) TAJ HOTELS INTERNATIONAL	Transaction ID: SB21B-862999-240000
	Mailing Address 15 Arlington Street	Date of Disbursement MM / DD / YYYY 03 / 31 / 2009
	City BOSTON State MA Zip Code 02116	Amount of Each Disbursement this Period 257.51
	Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	002 Category/Type <b>[MEMO ITEM]</b> Memo Entry
<b>B.</b>	Full Name (Last, First, Middle Initial) USAIRWAYS	Transaction ID: SB21B-862999-250000
	Mailing Address 201 E Jefferson St	Date of Disbursement MM / DD / YYYY 03 / 31 / 2009
	City PHOENIX State AZ Zip Code 85034	Amount of Each Disbursement this Period -717.60
	Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	002 Category/Type <b>[MEMO ITEM]</b> Memo Entry
<b>C.</b>	Full Name (Last, First, Middle Initial) 701/801 PENNSYLVANIA AVE	Transaction ID: SB21B-862999-260000
	Mailing Address 701 Pennsylvania Ave, NW	Date of Disbursement MM / DD / YYYY 04 / 02 / 2009
	City WASHINGTON State DC Zip Code 20004	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	002 Category/Type <b>[MEMO ITEM]</b> Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Brennan Bilberry <hr/> Mailing Address 722 5th St NE <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement Generic Cmte. Research Materials Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 9 <hr/> <b>Amount of Each Disbursement this Period</b> 73.92
<b>B.</b>	Full Name (Last, First, Middle Initial) Lila Rose <hr/> Mailing Address 1531 North Pierce Street #811 <hr/> City Arlington State VA Zip Code 22209 <hr/> Purpose of Disbursement Generic Cmte. Catering Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863002 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 9 <hr/> <b>Amount of Each Disbursement this Period</b> 30.90
<b>C.</b>	Full Name (Last, First, Middle Initial) Lila Rose <hr/> Mailing Address 1531 North Pierce Street #811 <hr/> City Arlington State VA Zip Code 22209 <hr/> Purpose of Disbursement Telephones Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863003 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 9 <hr/> <b>Amount of Each Disbursement this Period</b> 180.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>284.82</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Lila Rose	Transaction ID: SB21B-863004 Date of Disbursement 04 / 23 / 2009
	Mailing Address 1531 North Pierce Street #811	Amount of Each Disbursement this Period 14.27
	City Arlington State VA Zip Code 22209	
	Purpose of Disbursement Travel Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Todd Schulte	Transaction ID: SB21B-863005 Date of Disbursement 04 / 23 / 2009
	Mailing Address 631 D Street, NW Apt. 230	Amount of Each Disbursement this Period 155.54
	City Washington State DC Zip Code 20004	
	Purpose of Disbursement Telephones Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Todd Schulte	Transaction ID: SB21B-863007 Date of Disbursement 04 / 23 / 2009
	Mailing Address 631 D Street, NW Apt. 230	Amount of Each Disbursement this Period 600.00
	City Washington State DC Zip Code 20004	
	Purpose of Disbursement Per Diem Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>769.81</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Kelly & Associates Insurance Group, Inc. <hr/> Mailing Address P.O. Box 630283 <hr/> City Baltimore State MD Zip Code 21263 <hr/> Purpose of Disbursement Generic Cmte. Processing Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-862781 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 9
	Amount of Each Disbursement this Period 45.60

<b>B.</b> Full Name (Last, First, Middle Initial) Kelly & Associates Insurance Group, Inc. <hr/> Mailing Address P.O. Box 630283 <hr/> City Baltimore State MD Zip Code 21263 <hr/> Purpose of Disbursement Insurance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-862782 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 9
	Amount of Each Disbursement this Period 33605.61

<b>C.</b> Full Name (Last, First, Middle Initial) Blue State Digital, LLC <hr/> Mailing Address 734 15th Street, NW Suite 1200 <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Generic Cmte. OnLine Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863009 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 20550.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	54201.21
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Marissa Halat</p> <p>Mailing Address 156 Newbury Road</p> <p>City Howell State NJ Zip Code 07731</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863010</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="48.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Sisk Mailing Service</p> <p>Mailing Address 203 Log Canoe Circle</p> <p>City Stevensville State MD Zip Code 21666</p> <p>Purpose of Disbursement Generic Cmte. Postage/Delivery</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863012</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="88000.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) 4C Partners, LLC</p> <p>Mailing Address 1415 Rhode Island Ave., NW #316</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Generic Strategic Political Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863013</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="20000.00"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="108048.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 420 / 551

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Earl L. Ashton <hr/> Mailing Address 6924 9th Street NW <hr/> City Washington State DC Zip Code 20012 Purpose of Disbursement Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863014 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 59.00
<b>B.</b> Full Name (Last, First, Middle Initial) AT & T <hr/> Mailing Address P.O. Box 13148 <hr/> City Newark State NJ Zip Code 07101-5648 Purpose of Disbursement Computer Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863015 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 3032.54
<b>C.</b> Full Name (Last, First, Middle Initial) Berliner Photography, LLC <hr/> Mailing Address PO Box 480066 <hr/> City Los Angeles State CA Zip Code 90048 Purpose of Disbursement Generic Cmte. Events/Meetings Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863016 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 1050.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4141.54
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Russ Campbell Photography	Transaction ID: SB21B-863017
	Mailing Address 1 Charles Street	Date of Disbursement MM / DD / YYYY 04 / 24 / 2009
	City Maynard State MA Zip Code 01754	Amount of Each Disbursement this Period 475.00
	Purpose of Disbursement Generic Cmte. Events/Meetings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Terri New	Transaction ID: SB21B-863018
	Mailing Address 11740 San Vicente Blvd Suite 204	Date of Disbursement MM / DD / YYYY 04 / 24 / 2009
	City Los Angeles State CA Zip Code 90049	Amount of Each Disbursement this Period 10000.00
	Purpose of Disbursement Generic Cmte. Fundraising Svcs	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) David L. Andrukitis, Inc.	Transaction ID: SB21B-863019
	Mailing Address 50 E Street, SE	Date of Disbursement MM / DD / YYYY 04 / 24 / 2009
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 266.49
	Purpose of Disbursement Generic Cmte. Printing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	10741.49
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) David L. Andrukitis, Inc.</p> <p>Mailing Address 50 E Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Generic Cmte. Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863020 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 148.05</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) David L. Andrukitis, Inc.</p> <p>Mailing Address 50 E Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Generic Cmte. Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863021 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 218.90</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) David L. Andrukitis, Inc.</p> <p>Mailing Address 50 E Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Generic Cmte. Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863022 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 401.32</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

768.27

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) David L. Andrukitis, Inc.	Transaction ID: SB21B-863023 Date of Disbursement 04 / 24 / 2009
	Mailing Address 50 E Street, SE	Amount of Each Disbursement this Period 292.93
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Generic Cmte. Printing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Diana Fassbender	Transaction ID: SB21B-863024 Date of Disbursement 04 / 24 / 2009
	Mailing Address 1629 Columbia Rd NW Apt 630	Amount of Each Disbursement this Period 159.45
	City Washington State DC Zip Code 20009	
	Purpose of Disbursement Travel	Category/ Type 002
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Susan Gage Caterers, Inc.	Transaction ID: SB21B-863025 Date of Disbursement 04 / 24 / 2009
	Mailing Address 7411 Livingston Road	Amount of Each Disbursement this Period 7007.96
	City Oxon Hill State MD Zip Code 20745	
	Purpose of Disbursement Generic Cmte. Events/Meetings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	7460.34
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Amie Kershner	Transaction ID: SB21B-863026 Date of Disbursement 04 / 24 / 2009
	Mailing Address 3114 E Baltimore	Amount of Each Disbursement this Period 62.72
	City Baltimore State MD Zip Code 21224	
	Purpose of Disbursement Generic Cmte. Catering	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Melissa Kurek	Transaction ID: SB21B-863027 Date of Disbursement 04 / 24 / 2009
	Mailing Address 1741 U St NW Apt 1	Amount of Each Disbursement this Period 57.00
	City Washington State DC Zip Code 20009	
	Purpose of Disbursement Travel	Category/ Type 002
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Bradley Pollock	Transaction ID: SB21B-863028 Date of Disbursement 04 / 24 / 2009
	Mailing Address 612 N Oxford St	Amount of Each Disbursement this Period 77.55
	City Arlington State VA Zip Code 22203	
	Purpose of Disbursement Generic Cmte. Research Materials	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

197.27

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Verizon Wireless  Mailing Address PO Box 25505  City Lehigh Valley State PA Zip Code 18002-5505  Purpose of Disbursement Wireless Service Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863029 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9  Amount of Each Disbursement this Period 648.28  Category/Type 001
<b>B.</b>	Full Name (Last, First, Middle Initial) Verizon  Mailing Address P.O. Box 660720  City Dallas State TX Zip Code 75266  Purpose of Disbursement Telephones Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863030 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9  Amount of Each Disbursement this Period 31.86  Category/Type 001
<b>C.</b>	Full Name (Last, First, Middle Initial) Jonathan Vogel  Mailing Address 1239 Duncan Place, NE  City Washington State DC Zip Code 20002  Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863031 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9  Amount of Each Disbursement this Period 27.00  Category/Type 002

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

707.14

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jonathan Vogel</p> <p>Mailing Address 1239 Duncan Place, NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863032</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="56.50"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Jonathan Vogel</p> <p>Mailing Address 1239 Duncan Place, NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Telephones</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863033</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="96.45"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Louisa Whitney</p> <p>Mailing Address 1701 16th St., NW Apt. 721</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863034</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="27.40"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="180.35"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Brian L Wolff</p> <p>Mailing Address 1443 Q Street, NW</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Travel Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863035 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 20.00</p> <p>Category/Type 002</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Voter Activation Network</p> <p>Mailing Address 48 Grove Street Suite 202</p> <p>City Somerville State MA Zip Code 02144</p> <p>Purpose of Disbursement Subscriptions Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863036 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Lisa Presta</p> <p>Mailing Address 2337 16th Ave.</p> <p>City San Francisco State CA Zip Code 94116</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863037 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 525.00</p> <p>Category/Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

2045.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Milly C Velez-Cooper</p> <p>Mailing Address 1682 Cedar Hollow Way</p> <p>City Reston State VA Zip Code 20194</p> <p>Purpose of Disbursement Petty Cash</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863038</p> <p>Date of Disbursement</p> <p><input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="92.29"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Nirali Amin</p> <p>Mailing Address 614 Walden Way</p> <p>City Lumberton State NJ Zip Code 08048</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863042</p> <p>Date of Disbursement</p> <p><input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2524.62"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Beth Barefoot</p> <p>Mailing Address 815 Maryland Ave NE Apt. 205</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863043</p> <p>Date of Disbursement</p> <p><input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3632.40"/></p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Emily Elizabeth Charlap <hr/> Mailing Address 719 D Street, NE Apt. 105 <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863044 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 2576.39
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Jacqueline M Forte-Mackay <hr/> Mailing Address 7511 Jaffrey Road <hr/> City Fort Washington State MD Zip Code 20744 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863046 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 7235.07
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Amanda Kohn <hr/> Mailing Address 7746 Wolford Way <hr/> City Lorton State VA Zip Code 22079 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863047 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 3104.18
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

12915.64

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Kristie Mark</p> <p>Mailing Address 2226 Decatur Place, NW</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863048</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="6847.54"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Glynis L Mason</p> <p>Mailing Address 1807 D Dewitt Avenue</p> <p>City Alexandria State VA Zip Code 22301</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863049</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4103.79"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Wilma J Simms</p> <p>Mailing Address 11644 Lockwood Dr. Apt. 204</p> <p>City Silver Spring State MD Zip Code 20904</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863050</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2189.18"/></p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Milly C Velez-Cooper</p> <p>Mailing Address 1682 Cedar Hollow Way</p> <p>City Reston State VA Zip Code 20194</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863051</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3450.32"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) William Ermini</p> <p>Mailing Address 2006 Oswald Place</p> <p>City Falls Church State VA Zip Code 20043</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863052</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2898.41"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) David Winston</p> <p>Mailing Address 4141 N. Henderson Rd. Apt. 1213</p> <p>City Arlington State VA Zip Code 22203</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863054</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5290.31"/></p> <p>Category/Type: <input type="text" value="001"/></p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Brandon English</p> <p>Mailing Address 1201 S. Courthouse Road #829</p> <p>City Arlington State VA Zip Code 22204</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863055 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 3203.89</p> <p>001 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Jason Rosenbaum</p> <p>Mailing Address 912 F St., NW #503</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863057 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 420.49</p> <p>001 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Taryn Rosenkranz</p> <p>Mailing Address 2234 Observatory Place NW</p> <p>City Washington State DC Zip Code 20007</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863058 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 5429.74</p> <p>001 Category/ Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

9054.12

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Taryn Rosenkranz</p> <p>Mailing Address 2234 Observatory Place NW</p> <p>City Washington State DC Zip Code 20007</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863059</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1471.25"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Lila Rose</p> <p>Mailing Address 1531 North Pierce Street #811</p> <p>City Arlington State VA Zip Code 22209</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863061</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3225.48"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Jonathan Vogel</p> <p>Mailing Address 1239 Duncan Place, NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863062</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="11009.43"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="15706.16"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Brian L Wolff Mailing Address 1443 Q Street, NW City Washington State DC Zip Code 20009 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863063 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 10565.54 Category/Type: 001
<b>B.</b> Full Name (Last, First, Middle Initial) Beverly Gilyard Mailing Address 2530 Hunters Square Court City Reston State VA Zip Code 20191 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863064 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 7184.26 Category/Type: 001
<b>C.</b> Full Name (Last, First, Middle Initial) Adam Goldberg Mailing Address 2151 California Street, NW Apt. 203 City Washington State DC Zip Code 20008 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863065 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 2615.74 Category/Type: 001

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	20365.54
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Robert Mook</p> <p>Mailing Address 1305 P Street, NW Apt. 1</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863068</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="7807.74"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Jennifer Pihlaja</p> <p>Mailing Address 3300 16th St NW #1015</p> <p>City Washington State DC Zip Code 20010</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863070</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="7608.81"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bret Wask</p> <p>Mailing Address 224 Gretna Green Court</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863071</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5666.47"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="21083.02"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Trevor Willett <hr/> Mailing Address 715 G St. NE <hr/> City Washington State DC Zip Code 20002 Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863072 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 2399.09
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Brennan Bilberry <hr/> Mailing Address 722 5th St NE <hr/> City Washington State DC Zip Code 20002 Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863073 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 3171.16
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Adam Broder <hr/> Mailing Address 3118 Mt. Pleasant St. NW <hr/> City Washington State DC Zip Code 20010 Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863074 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 2757.59
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**8327.84**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Nicole Landset</p> <p>Mailing Address 1826 15th Street, NW</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863075 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 5381.91</p> <p>001 Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Christine Lombardi</p> <p>Mailing Address 1436 E Street SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863076 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 2677.45</p> <p>001 Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Heather McHugh</p> <p>Mailing Address 2130 P Street NW Apt.603</p> <p>City Washington State DC Zip Code 20037</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863077 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 4926.11</p> <p>001 Category/Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

12985.47

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Kevin McKeon	Transaction ID: SB21B-863078 Date of Disbursement MM / DD / YYYY 04 / 24 / 2009
	Mailing Address 408 15th St., SE Unit B	Amount of Each Disbursement this Period 3695.78
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Payroll Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Kelly Polce	Transaction ID: SB21B-863079 Date of Disbursement MM / DD / YYYY 04 / 24 / 2009
	Mailing Address 1725 New Hampshire Ave., NW Apt #303	Amount of Each Disbursement this Period 2230.65
	City Washington State DC Zip Code 20009	
	Purpose of Disbursement Payroll Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bradley Pollock	Transaction ID: SB21B-863080 Date of Disbursement MM / DD / YYYY 04 / 24 / 2009
	Mailing Address 612 N Oxford St	Amount of Each Disbursement this Period 2847.94
	City Arlington State VA Zip Code 22203	
	Purpose of Disbursement Payroll Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>8774.37</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Gabrielle Adler</p> <p>Mailing Address 2939 Van Ness Street, NW Apt. 809</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863081 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 3642.64</p> <p>001 Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Stephen Carter</p> <p>Mailing Address 1207 Constitution Ave., NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863082 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 2219.84</p> <p>001 Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Jennifer Crider</p> <p>Mailing Address 3634 Gunston Road</p> <p>City Alexandria State VA Zip Code 22303</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863083 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 7171.93</p> <p>001 Category/Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

13034.41

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Christopher Fitzgerald</p> <p>Mailing Address 2630 Adams Mill Road, NW Apt. 308</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863084 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 1368.64</p> <p>001 Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Ryan Rudominer</p> <p>Mailing Address 1320 N. Veitech Street Apt. 1201</p> <p>City Arlington State VA Zip Code 22201</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863085 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 4705.92</p> <p>001 Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Jessica Santillo</p> <p>Mailing Address 2122 Massachusetts Avenue, NW Apt. 832</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863086 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 3803.91</p> <p>001 Category/Type</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	9878.47
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Shirpal Shah</p> <p>Mailing Address 1734 P Street, NW Apt. 24</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863087 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 3765.40</p> <p>001 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Steven Silver</p> <p>Mailing Address 4409 4TH Road North #2</p> <p>City Arlington State VA Zip Code 22203</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863088 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 4055.71</p> <p>001 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Andrew Stone</p> <p>Mailing Address 1002 O Street, NW</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863089 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 3915.05</p> <p>001 Category/ Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

11736.16

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Douglass Thornell  Mailing Address 1831 Wyoming Ave. NE #1  City Washington State DC Zip Code 20009  Purpose of Disbursement Payroll Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863090 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9	Amount of Each Disbursement this Period  1050.75
<b>B.</b>	Full Name (Last, First, Middle Initial) Stephanie Young  Mailing Address 910 M Street, NW #616  City Washington State DC Zip Code 20001  Purpose of Disbursement Payroll Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863091 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9	Amount of Each Disbursement this Period  2860.61
<b>C.</b>	Full Name (Last, First, Middle Initial) Carmela Clendening  Mailing Address 1390 Kenyon Street, NW Apt.404  City Washington State DC Zip Code 20010  Purpose of Disbursement Payroll Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863092 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9	Amount of Each Disbursement this Period  2123.94

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

6035.30

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Tiffany Deinzer  Mailing Address 664 Lexington Place, NE  City Washington State DC Zip Code 20002  Purpose of Disbursement Payroll Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863093 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9	Amount of Each Disbursement this Period  1581.83
<b>B.</b>	Full Name (Last, First, Middle Initial) Daniel O'brien  Mailing Address 1734 T Street, NW Unit 1  City Washington State DC Zip Code 20009  Purpose of Disbursement Payroll Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863094 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9	Amount of Each Disbursement this Period  3596.24
<b>C.</b>	Full Name (Last, First, Middle Initial) Yates Baroody  Mailing Address 2414 Tunlaw Road NW  City Washington State DC Zip Code 20007  Purpose of Disbursement Payroll Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863096 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9	Amount of Each Disbursement this Period  3029.78

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>8207.85</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Lindsay Brown</p> <p>Mailing Address 1112 M Street NW Apt. 1012</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863099 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 2576.39</p> <p>001 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Diana Fassbender</p> <p>Mailing Address 1629 Columbia Rd NW Apt 630</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863100 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 4207.17</p> <p>001 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Rachel Fischetti</p> <p>Mailing Address 2827 28th St., NW #30</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863101 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 3603.67</p> <p>001 Category/ Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

10387.23

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Rachel Fischetti Mailing Address 2827 28th St., NW #30 City Washington State DC Zip Code 20008 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863102 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 882.75 Category/Type: 001
<b>B.</b> Full Name (Last, First, Middle Initial) Melissa Kurek Mailing Address 1741 U St NW Apt 1 City Washington State DC Zip Code 20009 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863103 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 4382.77 Category/Type: 001
<b>C.</b> Full Name (Last, First, Middle Initial) Melissa Kurek Mailing Address 1741 U St NW Apt 1 City Washington State DC Zip Code 20009 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863104 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 3531.00 Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

8796.52

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Lindsey Melander	Transaction ID: SB21B-863106 Date of Disbursement
	Mailing Address 631 D Street, NW Apt. 230	<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20004	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Candidate Name	<input type="text" value="4750.61"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<input type="text" value="001"/> Category/Type

B.	Full Name (Last, First, Middle Initial) Lindsey Melander	Transaction ID: SB21B-863107 Date of Disbursement
	Mailing Address 631 D Street, NW Apt. 230	<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20004	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Candidate Name	<input type="text" value="4119.50"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<input type="text" value="001"/> Category/Type

C.	Full Name (Last, First, Middle Initial) Brian O'Donnell	Transaction ID: SB21B-863108 Date of Disbursement
	Mailing Address 3460 14th Street, NW Apt. 124	<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20010	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Candidate Name	<input type="text" value="1943.15"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<input type="text" value="001"/> Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="10813.26"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Brian O'Donnell</p> <p>Mailing Address 3460 14th Street, NW Apt. 124</p> <p>City Washington State DC Zip Code 20010</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863109 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 308.00</p> <p>001 Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Laura Rose</p> <p>Mailing Address 1722 19th Street, NW #703</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863110 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 2118.71</p> <p>001 Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Amy Salomone</p> <p>Mailing Address 2568 University Place, N.W. Apt. 2</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863111 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 3453.70</p> <p>001 Category/Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

5880.41

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Amy Salomone <hr/> Mailing Address 2568 University Place, N.W. Apt. 2 <hr/> City Washington State DC Zip Code 20009 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863112 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 882.75
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Kate Sullivan <hr/> Mailing Address 1302 Massachusetts Ave., SE <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863113 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 1981.80
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Kate Sullivan <hr/> Mailing Address 1302 Massachusetts Ave., SE <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863114 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 306.75
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

3171.30

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Amanda Swenson <hr/> Mailing Address 4419 N. 4th Road Apt. 2 <hr/> City Arlington State VA Zip Code 22203 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863115 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 3695.01
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Alexander Van Wagner <hr/> Mailing Address 1339 Perry Place NW <hr/> City Washington State DC Zip Code 20010 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863116 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 2203.83
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Alexander Van Wagner <hr/> Mailing Address 1339 Perry Place NW <hr/> City Washington State DC Zip Code 20010 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863117 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 306.75
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

6205.59

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Louisa Whitney <hr/> Mailing Address 1701 16th St., NW Apt. 721 <hr/> City Washington State DC Zip Code 20009 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863118 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 5977.29
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Louisa Whitney <hr/> Mailing Address 1701 16th St., NW Apt. 721 <hr/> City Washington State DC Zip Code 20009 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863119 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 4413.75
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Johanna Berkson <hr/> Mailing Address 7710 Woodmont Ave #805 <hr/> City Bethesda State MD Zip Code 20814 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863120 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 4026.53
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	14417.57
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Lauren Dikis</p> <p>Mailing Address 3105 11th St., NW</p> <p>City Washington State DC Zip Code 20010</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863121</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4060.18"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Robert Fenity</p> <p>Mailing Address 2732 Ordway Street NW #6</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863122</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3351.03"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Brent Parrish</p> <p>Mailing Address 719 D. St. NE Apt. 301</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863126</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1840.35"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="9251.56"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Todd Schulte	Transaction ID: SB21B-863127
	Mailing Address 631 D Street, NW Apt. 230	Date of Disbursement MM / DD / YYYY 04 / 24 / 2009
	City Washington State DC Zip Code 20004	Amount of Each Disbursement this Period 3733.38
	Purpose of Disbursement Payroll Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Gregory Berlin	Transaction ID: SB21B-863128
	Mailing Address 2701 Calvert St., NW Apt. 404	Date of Disbursement MM / DD / YYYY 04 / 24 / 2009
	City Washington State DC Zip Code 20008	Amount of Each Disbursement this Period 1913.79
	Purpose of Disbursement Payroll Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Angela Guzman	Transaction ID: SB21B-863129
	Mailing Address 1309 N. Glebe Road	Date of Disbursement MM / DD / YYYY 04 / 24 / 2009
	City Arlington State VA Zip Code 22207	Amount of Each Disbursement this Period 4046.67
	Purpose of Disbursement Payroll Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	9693.84
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Angela Guzman</p> <p>Mailing Address 1309 N. Glebe Road</p> <p>City Arlington State VA Zip Code 22207</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863130</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1540.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) David Higa</p> <p>Mailing Address 801 North Monroe St. #407</p> <p>City Arlington State VA Zip Code 22201</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863131</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2851.37"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Joseph Shafer</p> <p>Mailing Address 100 I Street, S.E. Apt. 603</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863132</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4899.70"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="9291.07"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text" value=""/></p>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Marlon Marshall	Transaction ID: SB21B-863133 Date of Disbursement
	Mailing Address 127 U Street, NE	<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Candidate Name	<input type="text" value="2792.04"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<input type="text" value="001"/> Category/Type

B.	Full Name (Last, First, Middle Initial) Robert Brennan	Transaction ID: SB21B-863008 Date of Disbursement
	Mailing Address 809 6th St., NW Apt 35	<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Candidate Name	<input type="text" value="1500.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<input type="text" value="001"/> Category/Type

C.	Full Name (Last, First, Middle Initial) George Connelly	Transaction ID: SB21B-863045 Date of Disbursement
	Mailing Address 113 1/2 Tennessee Ave, NE	<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Candidate Name	<input type="text" value="2253.24"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<input type="text" value="001"/> Category/Type

**SUBTOTAL** of Disbursements This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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 Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Brent Kimmel</p> <p>Mailing Address 304 2nd St., SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863053</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3765.40"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Matthew Kehres</p> <p>Mailing Address 2800 Quebec St., NW Apt. 1213</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863056</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2860.61"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Casey Redmon</p> <p>Mailing Address 623 4th Street, NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863060</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2050.34"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="8676.35"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Ari Schoenholtz <hr/> Mailing Address 7125 Fairfax Road <hr/> City Bethesda State MD Zip Code 20814 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863066 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 1479.82
<b>B.</b> Full Name (Last, First, Middle Initial) Travis Lowe <hr/> Mailing Address 70 I Street, S.E. <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863067 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 6127.33
<b>C.</b> Full Name (Last, First, Middle Initial) Kathleen Nee <hr/> Mailing Address 407 A Street, NE <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863069 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 4871.76

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

12478.91

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jessica Aune</p> <p>Mailing Address 138A North Carolina Ave, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863095 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 2522.00</p> <p>001 Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Robert Brennan</p> <p>Mailing Address 809 6th St., NW Apt 35</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863097 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 1931.76</p> <p>001 Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Robert Brennan</p> <p>Mailing Address 809 6th St., NW Apt 35</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863098 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 882.75</p> <p>001 Category/Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

5336.51

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Evan McMillan</p> <p>Mailing Address 1536 32nd Street, NW</p> <p>City Washington State DC Zip Code 20007</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863105 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 1304.99</p> <p>001 Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Krista Haagenstad</p> <p>Mailing Address 1001 South Carolina Ave., SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863123 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 2156.86</p> <p>001 Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Amie Kershner</p> <p>Mailing Address 3114 E Baltimore</p> <p>City Baltimore State MD Zip Code 21224</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863124 <b>Date of Disbursement</b> 04 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 5543.97</p> <p>001 Category/Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

9005.82

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Gina Natale Mailing Address 27 3rd Street, NW City Washington State DC Zip Code 20002 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863125 Date of Disbursement 04 / 24 / 2009	Amount of Each Disbursement this Period 1496.05
B.	Full Name (Last, First, Middle Initial) Automatic Data Processing Mailing Address 11411 Red Run Blvd. City Owings Mills State MD Zip Code 21117 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863135 Date of Disbursement 04 / 24 / 2009	Amount of Each Disbursement this Period 140512.69
C.	Full Name (Last, First, Middle Initial) Automatic Data Processing Mailing Address 11411 Red Run Blvd. City Owings Mills State MD Zip Code 21117 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863151 Date of Disbursement 04 / 24 / 2009	Amount of Each Disbursement this Period 36449.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

178458.27

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Automatic Data Processing Mailing Address 11411 Red Run Blvd. City Owings Mills State MD Zip Code 21117 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863136 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 435.95
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Automatic Data Processing Mailing Address 11411 Red Run Blvd. City Owings Mills State MD Zip Code 21117 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863137 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 1517.76
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Print Mail Communications Mailing Address 7201 Lockport Place City Lorton State VA Zip Code 22079 Purpose of Disbursement Generic Cmte. Postage/Delivery Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863152 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 2735.81
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4689.52
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) American List Counsel, Inc. <hr/> Mailing Address P.O. Box 32189 <hr/> City Hartford State CT Zip Code 06150-2189 <hr/> Purpose of Disbursement Generic Cmte. List Exchange Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863153 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 45380.31
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) American List Counsel, Inc. <hr/> Mailing Address P.O. Box 32189 <hr/> City Hartford State CT Zip Code 06150-2189 <hr/> Purpose of Disbursement Generic Cmte. List Exchange Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863154 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 512.01
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) American List Counsel, Inc. <hr/> Mailing Address P.O. Box 32189 <hr/> City Hartford State CT Zip Code 06150-2189 <hr/> Purpose of Disbursement Generic Cmte. List Exchange Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-863155 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 154.38
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

46046.70

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) American List Counsel, Inc. <hr/> Mailing Address P.O. Box 32189 <hr/> City Hartford State CT Zip Code 06150-2189 <hr/> Purpose of Disbursement Generic Cmte. List Exchange Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863156 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 420.06
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Care2.com, Inc. <hr/> Mailing Address 275 Shoreline Dr #150 <hr/> City Redwood City State CA Zip Code 94065 <hr/> Purpose of Disbursement Generic Cmte. List Exchange Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863157 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 20750.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Data Direct, Inc. <hr/> Mailing Address 181 Potomac Street PO Box 855 <hr/> City Harpers State WV Zip Code 25425 <hr/> Purpose of Disbursement Computer Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863158 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 2594.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

23764.06

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) The Data Center, Inc.</p> <p>Mailing Address 11200 Waples Mill Road Suite 100</p> <p>City Fairfax State VA Zip Code 22030</p> <p>Purpose of Disbursement Computer Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863159</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 14000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) The Data Center, Inc.</p> <p>Mailing Address 11200 Waples Mill Road Suite 100</p> <p>City Fairfax State VA Zip Code 22030</p> <p>Purpose of Disbursement Computer Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863160</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 615.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Integrated Direct Marketing, LLC</p> <p>Mailing Address 1250 Connecticut Avenue, NW Suite 200</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Generic Cmte. Fundraising Svcs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863161</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 42371.52</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

56986.52

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Merkle Response Services, Inc.	Transaction ID: SB21B-863162 Date of Disbursement
	Mailing Address 100 Jamison Court	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Hagerstown State MD Zip Code 21740	Amount of Each Disbursement this Period
	Purpose of Disbursement Computer Services	<input type="text" value="15242.47"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Merkle Response Services, Inc.	Transaction ID: SB21B-863163 Date of Disbursement
	Mailing Address 100 Jamison Court	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Hagerstown State MD Zip Code 21740	Amount of Each Disbursement this Period
	Purpose of Disbursement Generic Cmte. Postage/Delivery	<input type="text" value="238.73"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) The Production Advantage Inc.	Transaction ID: SB21B-863164 Date of Disbursement
	Mailing Address 14120 Sullyfield Cir., Suite C	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Chantilly State VA Zip Code 20151	Amount of Each Disbursement this Period
	Purpose of Disbursement Generic Cmte. Printing	<input type="text" value="44720.77"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) The Production Advantage Inc.</p> <p>Mailing Address 14120 Sullyfield Cir., Suite C</p> <p>City Chantilly State VA Zip Code 20151</p> <p>Purpose of Disbursement Generic Cmte. Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863165 <b>Date of Disbursement</b> 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 3038.70</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) The Production Advantage Inc.</p> <p>Mailing Address 14120 Sullyfield Cir., Suite C</p> <p>City Chantilly State VA Zip Code 20151</p> <p>Purpose of Disbursement Generic Cmte. Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863166 <b>Date of Disbursement</b> 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 32458.87</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) The Production Advantage Inc.</p> <p>Mailing Address 14120 Sullyfield Cir., Suite C</p> <p>City Chantilly State VA Zip Code 20151</p> <p>Purpose of Disbursement Generic Cmte. Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863167 <b>Date of Disbursement</b> 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 8920.08</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

44417.65

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) The Production Advantage Inc.</p> <p>Mailing Address 14120 Sullyfield Cir., Suite C</p> <p>City Chantilly State VA Zip Code 20151</p> <p>Purpose of Disbursement Generic Cmte. Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863168</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 1588.56</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) The Production Advantage Inc.</p> <p>Mailing Address 14120 Sullyfield Cir., Suite C</p> <p>City Chantilly State VA Zip Code 20151</p> <p>Purpose of Disbursement Generic Cmte. Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863169</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 43108.05</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) The Production Advantage Inc.</p> <p>Mailing Address 14120 Sullyfield Cir., Suite C</p> <p>City Chantilly State VA Zip Code 20151</p> <p>Purpose of Disbursement Generic Cmte. Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863170</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 2389.60</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>47086.21</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) The Production Advantage Inc. <hr/> Mailing Address 14120 Sullyfield Cir., Suite C <hr/> City Chantilly State VA Zip Code 20151 <hr/> Purpose of Disbursement Generic Cmte. Printing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863171 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 880.09
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) The Production Advantage Inc. <hr/> Mailing Address 14120 Sullyfield Cir., Suite C <hr/> City Chantilly State VA Zip Code 20151 <hr/> Purpose of Disbursement Generic Cmte. Printing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863172 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 15046.28
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) The Production Advantage Inc. <hr/> Mailing Address 14120 Sullyfield Cir., Suite C <hr/> City Chantilly State VA Zip Code 20151 <hr/> Purpose of Disbursement Generic Cmte. Printing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863173 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 1500.00
	Category/ Type
	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	17426.37
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) The Production Advantage Inc.</p> <p>Mailing Address 14120 Sullyfield Cir., Suite C</p> <p>City Chantilly State VA Zip Code 20151</p> <p>Purpose of Disbursement Generic Cmte. Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863174</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 7345.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) The Production Advantage Inc.</p> <p>Mailing Address 14120 Sullyfield Cir., Suite C</p> <p>City Chantilly State VA Zip Code 20151</p> <p>Purpose of Disbursement Generic Cmte. Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863175</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 750.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Share Group, Inc.</p> <p>Mailing Address PO Box 55183</p> <p>City Boston State MA Zip Code 02205-5183</p> <p>Purpose of Disbursement Generic Cmte. Telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863176</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 5062.77</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

13157.77

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Share Group, Inc.</p> <p>Mailing Address PO Box 55183</p> <p>City Boston State MA Zip Code 02205-5183</p> <p>Purpose of Disbursement Generic Cmte. Telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863177</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 638.93</p> <p>Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Share Group, Inc.</p> <p>Mailing Address PO Box 55183</p> <p>City Boston State MA Zip Code 02205-5183</p> <p>Purpose of Disbursement Generic Cmte. Telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863178</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 333.90</p> <p>Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Triplex A Donnelley Company</p> <p>Mailing Address PO Box 3603</p> <p>City Omaha State NE Zip Code 68103</p> <p>Purpose of Disbursement Computer Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863179</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 3462.24</p> <p>Category/Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

4435.07

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Triplex A Donnelley Company	Transaction ID: SB21B-863180 Date of Disbursement 04 / 30 / 2009
	Mailing Address PO Box 3603	Amount of Each Disbursement this Period 331.03
	City Omaha State NE Zip Code 68103	
	Purpose of Disbursement Generic Cmte. Telemarketing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Telefund, Inc.	Transaction ID: SB21B-863181 Date of Disbursement 04 / 30 / 2009
	Mailing Address Attention: Nicole Lane P.O. Box 2366	Amount of Each Disbursement this Period 2037.00
	City Denver State CO Zip Code 80201-2366	
	Purpose of Disbursement Generic Cmte. Telemarketing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Telefund, Inc.	Transaction ID: SB21B-863182 Date of Disbursement 04 / 30 / 2009
	Mailing Address Attention: Nicole Lane P.O. Box 2366	Amount of Each Disbursement this Period 18240.85
	City Denver State CO Zip Code 80201-2366	
	Purpose of Disbursement Generic Cmte. Telemarketing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	20608.88
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Commonwealth Digital Office Solutions</p> <p>Mailing Address 21205 Ridgetop Circle</p> <p>City Sterling State VA Zip Code 20166-6501</p> <p>Purpose of Disbursement Copying</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863183</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="297.31"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Commonwealth Digital Office Solutions</p> <p>Mailing Address 21205 Ridgetop Circle</p> <p>City Sterling State VA Zip Code 20166-6501</p> <p>Purpose of Disbursement Copying</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863184</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="349.79"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Commonwealth Digital Office Solutions</p> <p>Mailing Address 21205 Ridgetop Circle</p> <p>City Sterling State VA Zip Code 20166-6501</p> <p>Purpose of Disbursement Generic Cmte. Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863185</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="11.30"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="658.40"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) David L. Andrukitis, Inc.</p> <p>Mailing Address 50 E Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Generic Cmte. Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863186 <b>Date of Disbursement</b> 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 526.64</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) David L. Andrukitis, Inc.</p> <p>Mailing Address 50 E Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Generic Cmte. Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863187 <b>Date of Disbursement</b> 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 88.83</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Max Ultimate Food, Inc.</p> <p>Mailing Address 101 Hampden Street</p> <p>City Boston State MA Zip Code 02119</p> <p>Purpose of Disbursement Generic Cmte. Events/Meetings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-863188 <b>Date of Disbursement</b> 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 3139.19</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

3754.66

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Red Sage/Spy City Catering <hr/> Mailing Address 1319 F Street, NW Suite 808 <hr/> City Washington State DC Zip Code 20004 <hr/> Purpose of Disbursement Generic Cmte. Catering Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863189 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9	Amount of Each Disbursement this Period 460.94
<b>B.</b>	Full Name (Last, First, Middle Initial) Red Sage/Spy City Catering <hr/> Mailing Address 1319 F Street, NW Suite 808 <hr/> City Washington State DC Zip Code 20004 <hr/> Purpose of Disbursement Generic Cmte. Catering Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863190 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9	Amount of Each Disbursement this Period 102.44
<b>C.</b>	Full Name (Last, First, Middle Initial) Red Sage/Spy City Catering <hr/> Mailing Address 1319 F Street, NW Suite 808 <hr/> City Washington State DC Zip Code 20004 <hr/> Purpose of Disbursement Generic Cmte. Catering Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-863191 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9	Amount of Each Disbursement this Period 460.94

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1024.32
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) City of Manchester  Mailing Address Office of the Mayor One City Hall Plaza  City Manchester State NH Zip Code 03101  Purpose of Disbursement Generic Cmte. Research Materials  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B-863192 Date of Disbursement 04 / 30 / 2009  Amount of Each Disbursement this Period 749.50
<b>B.</b>	Full Name (Last, First, Middle Initial) Bank of America, NA  Mailing Address 730 15th Street, NW  City Washington State DC Zip Code 20005  Purpose of Disbursement Interest  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B-863195 Date of Disbursement 04 / 30 / 2009  Amount of Each Disbursement this Period 23084.77
<b>C.</b>	Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee  Mailing Address 430 S Capitol Street, SE  City Washington State DC Zip Code 20003  Purpose of Disbursement Offset for In-House Contributions  Candidate Name Democratic Congressional Campaign Committee  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B-863535 Date of Disbursement 04 / 30 / 2009  Amount of Each Disbursement this Period -620.01

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

23214.26

**TOTAL** This Period (last page this line number only) ..... ▶

1682931.72

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)  
New York State Democratic Cmte

Transaction ID: SB22-862568

Date of Disbursement

Mailing Address 461 Park Avenue South  
10th Floor

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	0	9

City State Zip Code  
New York NY 10016

Amount of Each Disbursement this Period

4520.00
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Purpose of Disbursement  
Transfer

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Category/  
Type

Candidate Name  
New York State Democratic Cmte

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

4520.00
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**TOTAL** This Period (last page this line number only) ..... ►

4520.00
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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.</p> <p>Mailing Address 109 Clermont Avenue</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement InKind Catering</p> <p>Candidate Name Bobby Neal Bright, Sr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862622</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 175.34</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.</p> <p>Mailing Address 109 Clermont Avenue</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement InKind Catering</p> <p>Candidate Name R. Parker Griffith</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 05</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862623</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 175.35</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.</p> <p>Mailing Address 109 Clermont Avenue</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement InKind Catering</p> <p>Candidate Name Ann Kirkpatrick</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862624</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 175.35</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

526.04

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.</p> <p>Mailing Address 109 Clermont Avenue</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement InKind Catering</p> <p>Candidate Name Harry Mitchell</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 05</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862625</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 175.35</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.</p> <p>Mailing Address 109 Clermont Avenue</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement InKind Catering</p> <p>Candidate Name Gabrielle Giffords</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 08</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862626</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 175.35</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.</p> <p>Mailing Address 109 Clermont Avenue</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement InKind Catering</p> <p>Candidate Name Jerry McNerney</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 11</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862627</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 175.35</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

526.05

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.</p> <p>Mailing Address 109 Clermont Avenue</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement InKind Catering</p> <p>Candidate Name Elizabeth Markey</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 04</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862628</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 175.35</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.</p> <p>Mailing Address 109 Clermont Avenue</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement InKind Catering</p> <p>Candidate Name Jim Himes</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862629</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 175.35</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.</p> <p>Mailing Address 109 Clermont Avenue</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement InKind Catering</p> <p>Candidate Name Alan Mark Grayson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 08</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862630</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 175.35</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

526.05

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.</p> <p>Mailing Address 109 Clermont Avenue</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement InKind Catering</p> <p>Candidate Name Suzanne Kosmas</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: FL District: 24</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862631</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 175.35</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.</p> <p>Mailing Address 109 Clermont Avenue</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement InKind Catering</p> <p>Candidate Name Leonard Boswell</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IA District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862632</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 175.34</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.</p> <p>Mailing Address 109 Clermont Avenue</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement InKind Catering</p> <p>Candidate Name Walter Clifford Minnick</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: ID District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862633</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 175.35</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

526.04

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:  
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.</p> <p>Mailing Address 109 Clermont Avenue</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement InKind Catering</p> <p>Candidate Name Deborah Halvorson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 11</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862634</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 175.35</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.</p> <p>Mailing Address 109 Clermont Avenue</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement InKind Catering</p> <p>Candidate Name William G. Foster</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 14</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862635</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 175.35</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.</p> <p>Mailing Address 109 Clermont Avenue</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement InKind Catering</p> <p>Candidate Name Baron Hill</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 09</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862636</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 175.35</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

526.05

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc. <hr/> Mailing Address 109 Clermont Avenue <hr/> City Alexandria State VA Zip Code 22304 Purpose of Disbursement InKind Catering Candidate Name Frank Kratovil Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 01 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-862637 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 175.35
<b>B.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc. <hr/> Mailing Address 109 Clermont Avenue <hr/> City Alexandria State VA Zip Code 22304 Purpose of Disbursement InKind Catering Candidate Name Mark Hamilton Schauer Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-862638 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 175.35
<b>C.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc. <hr/> Mailing Address 109 Clermont Avenue <hr/> City Alexandria State VA Zip Code 22304 Purpose of Disbursement InKind Catering Candidate Name Gary Peters Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 09 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-862639 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 175.35

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	526.05
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.</p> <p>Mailing Address 109 Clermont Avenue</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement InKind Catering</p> <p>Candidate Name Travis W. Childers</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862640</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 175.35</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.</p> <p>Mailing Address 109 Clermont Avenue</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement InKind Catering</p> <p>Candidate Name Larry Kissell</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862641</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 175.35</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.</p> <p>Mailing Address 109 Clermont Avenue</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement InKind Catering</p> <p>Candidate Name Carol Shea-Porter</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862642</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 175.35</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>526.05</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc. <hr/> Mailing Address 109 Clermont Avenue <hr/> City Alexandria State VA Zip Code 22304 <hr/> Purpose of Disbursement InKind Catering Candidate Name John Adler <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 03 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type	Transaction ID: SB23-862643 Date of Disbursement 04 / 08 / 2009 <hr/> Amount of Each Disbursement this Period 175.34
	<b>B.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc. <hr/> Mailing Address 109 Clermont Avenue <hr/> City Alexandria State VA Zip Code 22304 <hr/> Purpose of Disbursement InKind Catering Candidate Name Martin Heinrich <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type
<b>C.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc. <hr/> Mailing Address 109 Clermont Avenue <hr/> City Alexandria State VA Zip Code 22304 <hr/> Purpose of Disbursement InKind Catering Candidate Name Harry Teague <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type	Transaction ID: SB23-862645 Date of Disbursement 04 / 08 / 2009 <hr/> Amount of Each Disbursement this Period 175.35

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

526.04

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.	Transaction ID: SB23-862646 Date of Disbursement
	Mailing Address 109 Clermont Avenue	<input type="text" value="04"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City Alexandria State VA Zip Code 22304	Amount of Each Disbursement this Period
	Purpose of Disbursement InKind Catering	<input type="text" value="175.35"/>
	Candidate Name Dina Titus	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.	Transaction ID: SB23-862647 Date of Disbursement
	Mailing Address 109 Clermont Avenue	<input type="text" value="04"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City Alexandria State VA Zip Code 22304	Amount of Each Disbursement this Period
	Purpose of Disbursement InKind Catering	<input type="text" value="175.35"/>
	Candidate Name Michael E McMahon	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.	Transaction ID: SB23-862648 Date of Disbursement
	Mailing Address 109 Clermont Avenue	<input type="text" value="04"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City Alexandria State VA Zip Code 22304	Amount of Each Disbursement this Period
	Purpose of Disbursement InKind Catering	<input type="text" value="175.34"/>
	Candidate Name Mike Angelo Arcuri	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="526.04"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.</p> <p>Mailing Address 109 Clermont Avenue</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement InKind Catering</p> <p>Candidate Name Daniel Benjamin Maffei</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862649</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 175.35</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.</p> <p>Mailing Address 109 Clermont Avenue</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement InKind Catering</p> <p>Candidate Name Eric Massa</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862650</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 175.35</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.</p> <p>Mailing Address 109 Clermont Avenue</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement InKind Catering</p> <p>Candidate Name Steven Driehaus</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862651</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 175.35</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

526.05

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.</p> <p>Mailing Address 109 Clermont Avenue</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement InKind Catering</p> <p>Candidate Name Mary Jo Kilroy</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862652</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 175.35</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.</p> <p>Mailing Address 109 Clermont Avenue</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement InKind Catering</p> <p>Candidate Name John A Boccieri</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 16</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862653</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 175.34</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.</p> <p>Mailing Address 109 Clermont Avenue</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement InKind Catering</p> <p>Candidate Name Kurt Schrader</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 05</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862654</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 175.35</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

526.04

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc. <hr/> Mailing Address 109 Clermont Avenue <hr/> City Alexandria State VA Zip Code 22304 <hr/> Purpose of Disbursement InKind Catering <hr/> Candidate Name Kathleen A. Dahlkemper <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 03 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-862655 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 175.35
<b>B.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc. <hr/> Mailing Address 109 Clermont Avenue <hr/> City Alexandria State VA Zip Code 22304 <hr/> Purpose of Disbursement InKind Catering <hr/> Candidate Name Christopher Paul Carney <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 10 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-862656 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 175.35
<b>C.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc. <hr/> Mailing Address 109 Clermont Avenue <hr/> City Alexandria State VA Zip Code 22304 <hr/> Purpose of Disbursement InKind Catering <hr/> Candidate Name Ciro D. Rodriguez <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 23 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-862657 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 175.35

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

526.05

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.</p> <p>Mailing Address 109 Clermont Avenue</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement InKind Catering</p> <p>Candidate Name Glenn Carlyle Nye, III</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862658</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 175.35</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.</p> <p>Mailing Address 109 Clermont Avenue</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement InKind Catering</p> <p>Candidate Name Thomas Stuart Price Perriello</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 05</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862659</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 175.35</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.</p> <p>Mailing Address 109 Clermont Avenue</p> <p>City Alexandria State VA Zip Code 22304</p> <p>Purpose of Disbursement InKind Catering</p> <p>Candidate Name Gerry Connolly</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 11</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862660</p> <p>Date of Disbursement 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 175.35</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

526.05

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Catering by Avalon, Inc.	Transaction ID: SB23-862661 Date of Disbursement
	Mailing Address 109 Clermont Avenue	<input type="text" value="04"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City Alexandria State VA Zip Code 22304	Amount of Each Disbursement this Period
	Purpose of Disbursement InKind Catering	<input type="text" value="175.35"/>
	Candidate Name Steve L Kagen	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB23-862944 Date of Disbursement
	Mailing Address P.O. Box 53155	<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2009"/>
	City Phoenix State AZ Zip Code 85072-3155	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Events/Meetings	<input type="text" value="21.58"/>
	Candidate Name Bobby Neal Bright, Sr.	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

See Attached Memo Entry

C.	Full Name (Last, First, Middle Initial) SCHNEIDER'S	Transaction ID: SB23-862944-10000 Date of Disbursement
	Mailing Address 300 Massachusetts Ave, NE	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Events/Meetings	<input type="text" value="21.58"/>
	Candidate Name Bobby Neal Bright, Sr.	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]  
Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="196.93"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address P.O. Box 53155  City Phoenix State AZ Zip Code 85072-3155  Purpose of Disbursement Fundraising Events/Meetings Candidate Name R. Parker Griffith Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AL District: 05	Transaction ID: SB23-862945 Date of Disbursement 04 / 22 / 2009  Amount of Each Disbursement this Period 21.58  See Attached Memo Entry
B.	Full Name (Last, First, Middle Initial) CONGRESSIONAL LIQUORS  Mailing Address 404 1st Street, SE  City WASHINGTON State DC Zip Code 20003  Purpose of Disbursement Fundraising Events/Meetings Candidate Name R. Parker Griffith Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AL District: 05	Transaction ID: SB23-862945-10000 Date of Disbursement 03 / 25 / 2009  Amount of Each Disbursement this Period 21.58  [MEMO ITEM] Memo Entry
C.	Full Name (Last, First, Middle Initial) Bank of America  Mailing Address P.O. Box 53155  City Phoenix State AZ Zip Code 85072-3155  Purpose of Disbursement Fundraising Events/Meetings Candidate Name Ann Kirkpatrick Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AZ District: 01	Transaction ID: SB23-862946 Date of Disbursement 04 / 22 / 2009  Amount of Each Disbursement this Period 21.58  See Attached Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>43.16</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 491 / 551

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) <b>CONGRESSIONAL LIQUORS</b> Mailing Address 404 1st Street, SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement Fundraising Events/Meetings Candidate Name Ann Kirkpatrick Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 01 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-862946-10000 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 9
	Amount of Each Disbursement this Period 21.58 [MEMO ITEM] Memo Entry

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Bank of America</b> Mailing Address P.O. Box 53155 City Phoenix State AZ Zip Code 85072-3155 Purpose of Disbursement Fundraising Events/Meetings Candidate Name Harry Mitchell Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 05 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-862947 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 21.58 See Attached Memo Entry

<b>C.</b> Full Name (Last, First, Middle Initial) <b>SCHNEIDER'S</b> Mailing Address 300 Massachusetts Ave, NE City WASHINGTON State DC Zip Code 20002 Purpose of Disbursement Fundraising Events/Meetings Candidate Name Harry Mitchell Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 05 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-862947-10000 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 9
	Amount of Each Disbursement this Period 21.58 [MEMO ITEM] Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	21.58
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB23-862948 Date of Disbursement 04 / 22 / 2009
	Mailing Address P.O. Box 53155	Amount of Each Disbursement this Period 21.58
	City Phoenix State AZ Zip Code 85072-3155	
	Purpose of Disbursement Fundraising Events/Meetings	Category/Type
	Candidate Name Gabrielle Giffords	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 08	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		See Attached Memo Entry

B.	Full Name (Last, First, Middle Initial) CONGRESSIONAL LIQUORS	Transaction ID: SB23-862948-10000 Date of Disbursement 03 / 25 / 2009
	Mailing Address 404 1st Street, SE	Amount of Each Disbursement this Period 21.58
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement Fundraising Events/Meetings	Category/Type
	Candidate Name Gabrielle Giffords	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 08	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Memo Entry

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB23-862949 Date of Disbursement 04 / 22 / 2009
	Mailing Address P.O. Box 53155	Amount of Each Disbursement this Period 21.58
	City Phoenix State AZ Zip Code 85072-3155	
	Purpose of Disbursement Fundraising Events/Meetings	Category/Type
	Candidate Name Jerry McNerney	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 11	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		See Attached Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	43.16
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) SCHNEIDER'S</p> <p>Mailing Address 300 Massachusetts Ave, NE</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement Fundraising Events/Meetings</p> <p>Candidate Name Jerry McNerney</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District: 11</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862949-10000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="21.58"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Fundraising Events/Meetings</p> <p>Candidate Name Elizabeth Markey</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CO District: 04</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862950</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="21.58"/></p> <p>See Attached Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) SCHNEIDER'S</p> <p>Mailing Address 300 Massachusetts Ave, NE</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement Fundraising Events/Meetings</p> <p>Candidate Name Elizabeth Markey</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CO District: 04</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862950-10000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="21.58"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="21.58"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text" value=""/></p>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Fundraising Events/Meetings</p> <p>Candidate Name Jim Himes</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: CT District: 04</p>	<p><b>Transaction ID:</b> SB23-862951</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="21.58"/></p> <p>See Attached Memo Entry</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) CONGRESSIONAL LIQUORS</p> <p>Mailing Address 404 1st Street, SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement Fundraising Events/Meetings</p> <p>Candidate Name Jim Himes</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: CT District: 04</p>	<p><b>Transaction ID:</b> SB23-862951-10000</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="21.58"/></p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Fundraising Events/Meetings</p> <p>Candidate Name Alan Mark Grayson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: FL District: 08</p>	<p><b>Transaction ID:</b> SB23-862952</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="21.58"/></p> <p>See Attached Memo Entry</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="43.16"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text" value=""/></p>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) <b>CONGRESSIONAL LIQUORS</b> Mailing Address 404 1st Street, SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement Fundraising Events/Meetings Candidate Name Alan Mark Grayson Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 08 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-862952-10000 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 9
	Amount of Each Disbursement this Period 21.58 [MEMO ITEM] Memo Entry

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Bank of America</b> Mailing Address P.O. Box 53155 City Phoenix State AZ Zip Code 85072-3155 Purpose of Disbursement Fundraising Events/Meetings Candidate Name Suzanne Kosmas Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-862953 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 21.58 See Attached Memo Entry

<b>C.</b> Full Name (Last, First, Middle Initial) <b>CONGRESSIONAL LIQUORS</b> Mailing Address 404 1st Street, SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement Fundraising Events/Meetings Candidate Name Suzanne Kosmas Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-862953-10000 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 9
	Amount of Each Disbursement this Period 21.58 [MEMO ITEM] Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	21.58
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 496 / 551

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Fundraising Events/Meetings</p> <p>Candidate Name Leonard Boswell</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862954</p> <p>Date of Disbursement 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 21.58</p> <p>Category/Type</p> <p>See Attached Memo Entry</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) CONGRESSIONAL LIQUORS</p> <p>Mailing Address 404 1st Street, SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement Fundraising Events/Meetings</p> <p>Candidate Name Leonard Boswell</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862954-10000</p> <p>Date of Disbursement 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 21.58</p> <p>Category/Type</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Fundraising Events/Meetings</p> <p>Candidate Name Walter Clifford Minnick</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862955</p> <p>Date of Disbursement 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 21.58</p> <p>Category/Type</p> <p>See Attached Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

43.16

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) SCHNEIDER'S	Transaction ID: SB23-862955-10000 Date of Disbursement																			
	Mailing Address 300 Massachusetts Ave, NE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	9
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0	3		2	6		2	0	9													
	City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Fundraising Events/Meetings	<table border="1"><tr><td>21.58</td></tr></table>	21.58																		
21.58																					
	Candidate Name Walter Clifford Minnick	Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Memo Entry																			
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: ID District: 01																				

B.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB23-862956 Date of Disbursement																			
	Mailing Address P.O. Box 53155	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	2		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	2		2	0	9													
	City Phoenix State AZ Zip Code 85072-3155	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Fundraising Events/Meetings	<table border="1"><tr><td>21.58</td></tr></table>	21.58																		
21.58																					
	Candidate Name Deborah Halvorson	Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	See Attached Memo Entry																			
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: IL District: 11																				

C.	Full Name (Last, First, Middle Initial) CONGRESSIONAL LIQUORS	Transaction ID: SB23-862956-10000 Date of Disbursement																			
	Mailing Address 404 1st Street, SE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	9
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0	3		2	5		2	0	9													
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Fundraising Events/Meetings	<table border="1"><tr><td>21.58</td></tr></table>	21.58																		
21.58																					
	Candidate Name Deborah Halvorson	Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Memo Entry																			
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: IL District: 11																				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>21.58</td></tr></table>	21.58
21.58		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Bank of America Mailing Address P.O. Box 53155 City Phoenix State AZ Zip Code 85072-3155 Purpose of Disbursement Fundraising Events/Meetings Candidate Name William G. Foster Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 14 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-862957 Date of Disbursement 04 / 22 / 2009
	Amount of Each Disbursement this Period 21.58
	Category/Type
	See Attached Memo Entry

<b>B.</b> Full Name (Last, First, Middle Initial) CONGRESSIONAL LIQUORS Mailing Address 404 1st Street, SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement Fundraising Events/Meetings Candidate Name William G. Foster Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 14 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-862957-10000 Date of Disbursement 03 / 25 / 2009
	Amount of Each Disbursement this Period 21.58
	Category/Type
	[MEMO ITEM] Memo Entry

<b>C.</b> Full Name (Last, First, Middle Initial) Bank of America Mailing Address P.O. Box 53155 City Phoenix State AZ Zip Code 85072-3155 Purpose of Disbursement Fundraising Events/Meetings Candidate Name Baron Hill Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 09 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-862958 Date of Disbursement 04 / 22 / 2009
	Amount of Each Disbursement this Period 21.58
	Category/Type
	See Attached Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	43.16
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 499 / 551

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>CONGRESSIONAL LIQUORS</b></p> <p>Mailing Address 404 1st Street, SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement Fundraising Events/Meetings</p> <p>Candidate Name Baron Hill</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IN District: 09</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862958-10000</p> <p><b>Date of Disbursement</b> 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 21.58</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>Bank of America</b></p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Fundraising Events/Meetings</p> <p>Candidate Name Frank Kratovil</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MD District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862959</p> <p><b>Date of Disbursement</b> 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 21.58</p> <p>See Attached Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>SCHNEIDER'S</b></p> <p>Mailing Address 300 Massachusetts Ave, NE</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement Fundraising Events/Meetings</p> <p>Candidate Name Frank Kratovil</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MD District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862959-10000</p> <p><b>Date of Disbursement</b> 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 21.58</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

21.58

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 500 / 551

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Fundraising Events/Meetings</p> <p>Candidate Name Mark Hamilton Schauer</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862960</p> <p>Date of Disbursement 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 21.58</p> <p>See Attached Memo Entry</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) SCHNEIDER'S</p> <p>Mailing Address 300 Massachusetts Ave, NE</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement Fundraising Events/Meetings</p> <p>Candidate Name Mark Hamilton Schauer</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862960-10000</p> <p>Date of Disbursement 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 21.58</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Fundraising Events/Meetings</p> <p>Candidate Name Gary Peters</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 09</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862961</p> <p>Date of Disbursement 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 21.58</p> <p>See Attached Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

43.16

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 501 / 551

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) SCHNEIDER'S	Transaction ID: SB23-862961-10000 Date of Disbursement 03 / 26 / 2009
	Mailing Address 300 Massachusetts Ave, NE	Amount of Each Disbursement this Period 21.58
	City WASHINGTON State DC Zip Code 20002	
	Purpose of Disbursement Fundraising Events/Meetings	
	Candidate Name Gary Peters	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: MI District: 09	[MEMO ITEM] Memo Entry

B.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB23-862962 Date of Disbursement 04 / 22 / 2009
	Mailing Address P.O. Box 53155	Amount of Each Disbursement this Period 21.58
	City Phoenix State AZ Zip Code 85072-3155	
	Purpose of Disbursement Fundraising Events/Meetings	
	Candidate Name Travis W. Childers	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: MS District: 01	See Attached Memo Entry

C.	Full Name (Last, First, Middle Initial) CONGRESSIONAL LIQUORS	Transaction ID: SB23-862962-10000 Date of Disbursement 03 / 25 / 2009
	Mailing Address 404 1st Street, SE	Amount of Each Disbursement this Period 21.58
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement Fundraising Events/Meetings	
	Candidate Name Travis W. Childers	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: MS District: 01	[MEMO ITEM] Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	21.58
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB23-862963 Date of Disbursement 04 / 22 / 2009
	Mailing Address P.O. Box 53155	Amount of Each Disbursement this Period 21.58
	City Phoenix State AZ Zip Code 85072-3155	
	Purpose of Disbursement Fundraising Events/Meetings	Category/Type
	Candidate Name Larry Kissell	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		See Attached Memo Entry

B.	Full Name (Last, First, Middle Initial) CONGRESSIONAL LIQUORS	Transaction ID: SB23-862963-10000 Date of Disbursement 03 / 25 / 2009
	Mailing Address 404 1st Street, SE	Amount of Each Disbursement this Period 21.58
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement Fundraising Events/Meetings	Category/Type
	Candidate Name Larry Kissell	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Memo Entry

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB23-862964 Date of Disbursement 04 / 22 / 2009
	Mailing Address P.O. Box 53155	Amount of Each Disbursement this Period 21.58
	City Phoenix State AZ Zip Code 85072-3155	
	Purpose of Disbursement Fundraising Events/Meetings	Category/Type
	Candidate Name Carol Shea-Porter	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		See Attached Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	43.16
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
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<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>CONGRESSIONAL LIQUORS</b></p> <p>Mailing Address 404 1st Street, SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement Fundraising Events/Meetings</p> <p>Candidate Name Carol Shea-Porter</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NH District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862964-10000</p> <p><b>Date of Disbursement</b> MM / DD / YYYY 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 21.58</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>Bank of America</b></p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Fundraising Events/Meetings</p> <p>Candidate Name John Adler</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NJ District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862965</p> <p><b>Date of Disbursement</b> MM / DD / YYYY 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 21.58</p> <p>See Attached Memo Entry</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>CONGRESSIONAL LIQUORS</b></p> <p>Mailing Address 404 1st Street, SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement Fundraising Events/Meetings</p> <p>Candidate Name John Adler</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NJ District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862965-10000</p> <p><b>Date of Disbursement</b> MM / DD / YYYY 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 21.58</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	21.58
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 504 / 551

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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 Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB23-862966 Date of Disbursement 04 / 22 / 2009
	Mailing Address P.O. Box 53155	Amount of Each Disbursement this Period 21.58
	City Phoenix State AZ Zip Code 85072-3155	
	Purpose of Disbursement Fundraising Events/Meetings	Category/Type
	Candidate Name Martin Heinrich	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		See Attached Memo Entry

B.	Full Name (Last, First, Middle Initial) CONGRESSIONAL LIQUORS	Transaction ID: SB23-862966-10000 Date of Disbursement 03 / 25 / 2009
	Mailing Address 404 1st Street, SE	Amount of Each Disbursement this Period 21.58
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement Fundraising Events/Meetings	Category/Type
	Candidate Name Martin Heinrich	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Memo Entry

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB23-862967 Date of Disbursement 04 / 22 / 2009
	Mailing Address P.O. Box 53155	Amount of Each Disbursement this Period 21.58
	City Phoenix State AZ Zip Code 85072-3155	
	Purpose of Disbursement Fundraising Events/Meetings	Category/Type
	Candidate Name Harry Teague	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		See Attached Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	43.16
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 505 / 551

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) SCHNEIDER'S	Transaction ID: SB23-862967-10000 Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	Mailing Address 300 Massachusetts Ave, NE	Amount of Each Disbursement this Period 21.58
	City WASHINGTON State DC Zip Code 20002	
	Purpose of Disbursement Fundraising Events/Meetings	Category/Type
	Candidate Name Harry Teague	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: NM District: 02	[MEMO ITEM] Memo Entry

B.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB23-862968 Date of Disbursement MM / DD / YYYY 04 / 22 / 2009
	Mailing Address P.O. Box 53155	Amount of Each Disbursement this Period 21.58
	City Phoenix State AZ Zip Code 85072-3155	
	Purpose of Disbursement Fundraising Events/Meetings	Category/Type
	Candidate Name Dina Titus	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: NV District: 03	See Attached Memo Entry

C.	Full Name (Last, First, Middle Initial) SCHNEIDER'S	Transaction ID: SB23-862968-10000 Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	Mailing Address 300 Massachusetts Ave, NE	Amount of Each Disbursement this Period 21.58
	City WASHINGTON State DC Zip Code 20002	
	Purpose of Disbursement Fundraising Events/Meetings	Category/Type
	Candidate Name Dina Titus	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: NV District: 03	[MEMO ITEM] Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	21.58
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 506 / 551

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB23-862969 Date of Disbursement 04 / 22 / 2009
	Mailing Address P.O. Box 53155	Amount of Each Disbursement this Period 21.58
	City Phoenix State AZ Zip Code 85072-3155	
	Purpose of Disbursement Fundraising Events/Meetings	Category/Type
	Candidate Name Michael E McMahon	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		See Attached Memo Entry

B.	Full Name (Last, First, Middle Initial) SCHNEIDER'S	Transaction ID: SB23-862969-10000 Date of Disbursement 03 / 26 / 2009
	Mailing Address 300 Massachusetts Ave, NE	Amount of Each Disbursement this Period 21.58
	City WASHINGTON State DC Zip Code 20002	
	Purpose of Disbursement Fundraising Events/Meetings	Category/Type
	Candidate Name Michael E McMahon	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Memo Entry

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB23-862970 Date of Disbursement 04 / 22 / 2009
	Mailing Address P.O. Box 53155	Amount of Each Disbursement this Period 21.58
	City Phoenix State AZ Zip Code 85072-3155	
	Purpose of Disbursement Fundraising Events/Meetings	Category/Type
	Candidate Name Mike Angelo Arcuri	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional) ..... ▶

43.16

TOTAL This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 507 / 551

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) <b>CONGRESSIONAL LIQUORS</b> Mailing Address 404 1st Street, SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement Fundraising Events/Meetings Candidate Name Mike Angelo Arcuri Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-862970-10000 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 9
	Amount of Each Disbursement this Period 21.58 [MEMO ITEM] Memo Entry

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Bank of America</b> Mailing Address P.O. Box 53155 City Phoenix State AZ Zip Code 85072-3155 Purpose of Disbursement Fundraising Events/Meetings Candidate Name Daniel Benjamin Maffei Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-862971 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 21.70 See Attached Memo Entry

<b>C.</b> Full Name (Last, First, Middle Initial) <b>CONGRESSIONAL LIQUORS</b> Mailing Address 404 1st Street, SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement Fundraising Events/Meetings Candidate Name Daniel Benjamin Maffei Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-862971-10000 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 9
	Amount of Each Disbursement this Period 20.51 [MEMO ITEM] Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	21.70
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) <b>SCHNEIDER'S</b>	Transaction ID: SB23-862971-20000
	Mailing Address 300 Massachusetts Ave, NE	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period 1.19
	Purpose of Disbursement Fundraising Events/Meetings	[MEMO ITEM] Memo Entry
	Candidate Name Daniel Benjamin Maffei	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: NY District: 25	

B.	Full Name (Last, First, Middle Initial) <b>Bank of America</b>	Transaction ID: SB23-862972
	Mailing Address P.O. Box 53155	Date of Disbursement MM / DD / YYYY 04 / 22 / 2009
	City Phoenix State AZ Zip Code 85072-3155	Amount of Each Disbursement this Period 21.58
	Purpose of Disbursement Fundraising Events/Meetings	See Attached Memo Entry
	Candidate Name Eric Massa	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: NY District: 29	

C.	Full Name (Last, First, Middle Initial) <b>CONGRESSIONAL LIQUORS</b>	Transaction ID: SB23-862972-10000
	Mailing Address 404 1st Street, SE	Date of Disbursement MM / DD / YYYY 03 / 25 / 2009
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 21.58
	Purpose of Disbursement Fundraising Events/Meetings	[MEMO ITEM] Memo Entry
	Candidate Name Eric Massa	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: NY District: 29	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	21.58
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Fundraising Events/Meetings</p> <p>Candidate Name Steven Driehaus</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862973</p> <p>Date of Disbursement 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 21.58</p> <p>See Attached Memo Entry</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) CONGRESSIONAL LIQUORS</p> <p>Mailing Address 404 1st Street, SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement Fundraising Events/Meetings</p> <p>Candidate Name Steven Driehaus</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862973-10000</p> <p>Date of Disbursement 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 21.58</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Fundraising Events/Meetings</p> <p>Candidate Name Mary Jo Kilroy</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862974</p> <p>Date of Disbursement 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 21.58</p> <p>See Attached Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

43.16

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) <b>CONGRESSIONAL LIQUORS</b> <hr/> Mailing Address 404 1st Street, SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement Fundraising Events/Meetings Candidate Name Mary Jo Kilroy Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-862974-10000 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 21.58 <hr/> <b>[MEMO ITEM]</b> Memo Entry
	Category/ Type

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Bank of America</b> <hr/> Mailing Address P.O. Box 53155 <hr/> City Phoenix State AZ Zip Code 85072-3155 Purpose of Disbursement Fundraising Events/Meetings Candidate Name John A Bocchieri Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 16 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-862975 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 21.58 <hr/> See Attached Memo Entry
	Category/ Type

<b>C.</b> Full Name (Last, First, Middle Initial) <b>CONGRESSIONAL LIQUORS</b> <hr/> Mailing Address 404 1st Street, SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement Fundraising Events/Meetings Candidate Name John A Bocchieri Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 16 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-862975-10000 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 21.58 <hr/> <b>[MEMO ITEM]</b> Memo Entry
	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	21.58
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 511 / 551

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Bank of America <hr/> Mailing Address P.O. Box 53155 <hr/> City Phoenix State AZ Zip Code 85072-3155 <hr/> Purpose of Disbursement Fundraising Events/Meetings Candidate Name Kurt Schrader Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District: 05	Transaction ID: SB23-862976 Date of Disbursement 04 / 22 / 2009
	Amount of Each Disbursement this Period 21.58
	Category/Type
	See Attached Memo Entry
<b>B.</b> Full Name (Last, First, Middle Initial) SCHNEIDER'S <hr/> Mailing Address 300 Massachusetts Ave, NE <hr/> City WASHINGTON State DC Zip Code 20002 <hr/> Purpose of Disbursement Fundraising Events/Meetings Candidate Name Kurt Schrader Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District: 05	Transaction ID: SB23-862976-10000 Date of Disbursement 03 / 26 / 2009
	Amount of Each Disbursement this Period 21.58
	Category/Type
	[MEMO ITEM] Memo Entry
<b>C.</b> Full Name (Last, First, Middle Initial) Bank of America <hr/> Mailing Address P.O. Box 53155 <hr/> City Phoenix State AZ Zip Code 85072-3155 <hr/> Purpose of Disbursement Fundraising Events/Meetings Candidate Name Kathleen A. Dahlkemper Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 03	Transaction ID: SB23-862977 Date of Disbursement 04 / 22 / 2009
	Amount of Each Disbursement this Period 21.58
	Category/Type
	See Attached Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	43.16
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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 Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) CONGRESSIONAL LIQUORS Mailing Address 404 1st Street, SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement Fundraising Events/Meetings Candidate Name Kathleen A. Dahlkemper Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 03 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-862977-10000 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 9
	Amount of Each Disbursement this Period 21.58 [MEMO ITEM] Memo Entry

<b>B.</b> Full Name (Last, First, Middle Initial) Bank of America Mailing Address P.O. Box 53155 City Phoenix State AZ Zip Code 85072-3155 Purpose of Disbursement Fundraising Events/Meetings Candidate Name Christopher Paul Carney Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-862978 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 21.58 See Attached Memo Entry

<b>C.</b> Full Name (Last, First, Middle Initial) CONGRESSIONAL LIQUORS Mailing Address 404 1st Street, SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement Fundraising Events/Meetings Candidate Name Christopher Paul Carney Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-862978-10000 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 9
	Amount of Each Disbursement this Period 21.58 [MEMO ITEM] Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	21.58
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Fundraising Events/Meetings</p> <p>Candidate Name Ciro D. Rodriguez</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862979</p> <p>Date of Disbursement 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 21.58</p> <p>See Attached Memo Entry</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) SCHNEIDER'S</p> <p>Mailing Address 300 Massachusetts Ave, NE</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement Fundraising Events/Meetings</p> <p>Candidate Name Ciro D. Rodriguez</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862979-10000</p> <p>Date of Disbursement 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 21.58</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Fundraising Events/Meetings</p> <p>Candidate Name Glenn Carlyle Nye, III</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862980</p> <p>Date of Disbursement 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 21.58</p> <p>See Attached Memo Entry</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

43.16

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) SCHNEIDER'S	Transaction ID: SB23-862980-10000
	Mailing Address 300 Massachusetts Ave, NE	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period 21.58
	Purpose of Disbursement Fundraising Events/Meetings	[MEMO ITEM] Memo Entry
	Candidate Name Glenn Carlyle Nye, III	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: VA District: 02	

B.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB23-862981
	Mailing Address P.O. Box 53155	Date of Disbursement MM / DD / YYYY 04 / 22 / 2009
	City Phoenix State AZ Zip Code 85072-3155	Amount of Each Disbursement this Period 21.58
	Purpose of Disbursement Fundraising Events/Meetings	See Attached Memo Entry
	Candidate Name Thomas Stuart Price Perriello	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: VA District: 05	

C.	Full Name (Last, First, Middle Initial) SCHNEIDER'S	Transaction ID: SB23-862981-10000
	Mailing Address 300 Massachusetts Ave, NE	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period 21.58
	Purpose of Disbursement Fundraising Events/Meetings	[MEMO ITEM] Memo Entry
	Candidate Name Thomas Stuart Price Perriello	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: VA District: 05	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	21.58
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Fundraising Events/Meetings</p> <p>Candidate Name Gerry Connolly</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 11</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862982</p> <p>Date of Disbursement 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 21.58</p> <p>See Attached Memo Entry</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) SCHNEIDER'S</p> <p>Mailing Address 300 Massachusetts Ave, NE</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement Fundraising Events/Meetings</p> <p>Candidate Name Gerry Connolly</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 11</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862982-10000</p> <p>Date of Disbursement 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 21.58</p> <p><b>[MEMO ITEM]</b> Memo Entry</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address P.O. Box 53155</p> <p>City Phoenix State AZ Zip Code 85072-3155</p> <p>Purpose of Disbursement Fundraising Events/Meetings</p> <p>Candidate Name Steve L Kagen</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-862983</p> <p>Date of Disbursement 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 21.58</p> <p>See Attached Memo Entry</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	43.16
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) CONGRESSIONAL LIQUORS Mailing Address 404 1st Street, SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement Fundraising Events/Meetings Candidate Name Steve L Kagen Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-862983-10000 Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2009
	Amount of Each Disbursement this Period 21.58 [MEMO ITEM] Memo Entry

<b>B.</b> Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee Mailing Address 430 S Capitol Street, SE City Washington State DC Zip Code 20003 Purpose of Disbursement In-House Fundraising Services Candidate Name Ann Kirkpatrick Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 01 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-863490 Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2009
	Amount of Each Disbursement this Period 19.72

<b>C.</b> Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee Mailing Address 430 S Capitol Street, SE City Washington State DC Zip Code 20003 Purpose of Disbursement In-House Fundraising Services Candidate Name Harry Mitchell Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 05 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-863491 Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2009
	Amount of Each Disbursement this Period 9.68

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	29.40
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-House Fundraising Services

Candidate Name  
Jerry McNerney

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: CA District: 11

Transaction ID: SB23-863492

Date of Disbursement

04 / 30 / 2009

Amount of Each Disbursement this Period

6.30

**B.** Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-House Fundraising Services

Candidate Name  
Mike Honda

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: CA District: 15

Transaction ID: SB23-863493

Date of Disbursement

04 / 30 / 2009

Amount of Each Disbursement this Period

8.57

**C.** Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-House Fundraising Services

Candidate Name  
Linda Sanchez

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: CA District: 39

Transaction ID: SB23-863494

Date of Disbursement

04 / 30 / 2009

Amount of Each Disbursement this Period

5.89

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

20.76

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name Loretta Sanchez</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 47</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-863495</p> <p>Date of Disbursement MM / DD / YYYY 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 7.43</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name Elizabeth Markey</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 04</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-863496</p> <p>Date of Disbursement MM / DD / YYYY 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 14.08</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name John B Larson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-863497</p> <p>Date of Disbursement MM / DD / YYYY 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 11.30</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**32.81**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name Joseph D Courtney</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-863498</p> <p>Date of Disbursement MM / DD / YYYY 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 6.56</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name Christopher S Murphy</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-863499</p> <p>Date of Disbursement MM / DD / YYYY 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 7.02</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name Debbie Wasserman Schultz</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 20</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-863500</p> <p>Date of Disbursement MM / DD / YYYY 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 13.75</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

27.33

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name John Barrow</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 12</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-863501</p> <p>Date of Disbursement MM / DD / YYYY 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 9.74</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name Bruce Braley</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-863502</p> <p>Date of Disbursement MM / DD / YYYY 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 10.01</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name Melissa Bean</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-863503</p> <p>Date of Disbursement MM / DD / YYYY 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 5.50</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

25.25

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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 Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-House Fundraising Services

Candidate Name  
William G. Foster

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: IL District: 14

Transaction ID: SB23-863504

Date of Disbursement

04 / 30 / 2009

Amount of Each Disbursement this Period

21.24

**B.** Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-House Fundraising Services

Candidate Name  
Brad Ellsworth

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: IN District: 08

Transaction ID: SB23-863505

Date of Disbursement

04 / 30 / 2009

Amount of Each Disbursement this Period

6.74

**C.** Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-House Fundraising Services

Candidate Name  
Baron Hill

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: IN District: 09

Transaction ID: SB23-863506

Date of Disbursement

04 / 30 / 2009

Amount of Each Disbursement this Period

9.71

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

37.69

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee	Transaction ID: SB23-863507 Date of Disbursement
	Mailing Address 430 S Capitol Street, SE	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement In-House Fundraising Services	<input type="text" value="21.05"/>
	Candidate Name Charlie Melancon, Jr	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 03	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee	Transaction ID: SB23-863508 Date of Disbursement
	Mailing Address 430 S Capitol Street, SE	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement In-House Fundraising Services	<input type="text" value="17.60"/>
	Candidate Name Mark Hamilton Schauer	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee	Transaction ID: SB23-863509 Date of Disbursement
	Mailing Address 430 S Capitol Street, SE	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement In-House Fundraising Services	<input type="text" value="37.62"/>
	Candidate Name Gary Peters	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 09	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="76.27"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name Travis W. Childers</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-863510</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 19.21</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name Donald Payne</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 10</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-863511</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 6.10</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name Harry Teague</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-863512</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 6.57</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>31.88</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-House Fundraising Services

Candidate Name  
Dina Titus

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NV District: 03

Transaction ID: SB23-863513

Date of Disbursement

04 / 30 / 2009

Amount of Each Disbursement this Period

5.14

**B.** Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-House Fundraising Services

Candidate Name  
Steve Israel

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 02

Transaction ID: SB23-863514

Date of Disbursement

04 / 30 / 2009

Amount of Each Disbursement this Period

13.69

**C.** Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-House Fundraising Services

Candidate Name  
Jerrold L. Nadler

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 08

Transaction ID: SB23-863515

Date of Disbursement

04 / 30 / 2009

Amount of Each Disbursement this Period

8.44

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

27.27

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-House Fundraising Services

Candidate Name  
Michael E McMahon

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 13

Transaction ID: SB23-863516

Date of Disbursement

04 / 30 / 2009

Amount of Each Disbursement this Period

6.22

**B.** Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-House Fundraising Services

Candidate Name  
Carolyn Maloney

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 14

Transaction ID: SB23-863517

Date of Disbursement

04 / 30 / 2009

Amount of Each Disbursement this Period

6.85

**C.** Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-House Fundraising Services

Candidate Name  
Charles Rangel

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 15

Transaction ID: SB23-863518

Date of Disbursement

04 / 30 / 2009

Amount of Each Disbursement this Period

81.10

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

94.17

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-House Fundraising Services

Candidate Name  
Nita Lowey

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 18

Transaction ID: SB23-863519

Date of Disbursement

04 / 30 / 2009

Amount of Each Disbursement this Period

5.65

**B.** Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-House Fundraising Services

Candidate Name  
Mike Angelo Arcuri

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 24

Transaction ID: SB23-863520

Date of Disbursement

04 / 30 / 2009

Amount of Each Disbursement this Period

7.12

**C.** Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-House Fundraising Services

Candidate Name  
Daniel Benjamin Maffei

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 25

Transaction ID: SB23-863521

Date of Disbursement

04 / 30 / 2009

Amount of Each Disbursement this Period

19.44

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

32.21

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-House Fundraising Services

Candidate Name  
Eric Massa

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 29

Transaction ID: SB23-863522

Date of Disbursement

04 / 30 / 2009

Amount of Each Disbursement this Period

18.72

**B.** Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-House Fundraising Services

Candidate Name  
Mary Jo Kilroy

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: OH District: 15

Transaction ID: SB23-863523

Date of Disbursement

04 / 30 / 2009

Amount of Each Disbursement this Period

21.16

**C.** Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-House Fundraising Services

Candidate Name  
John A Bocchieri

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: OH District: 16

Transaction ID: SB23-863524

Date of Disbursement

04 / 30 / 2009

Amount of Each Disbursement this Period

6.17

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

46.05

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee	Transaction ID: SB23-863525 Date of Disbursement 04 / 30 / 2009
	Mailing Address 430 S Capitol Street, SE	Amount of Each Disbursement this Period 9.69
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement In-House Fundraising Services	Category/Type
	Candidate Name Zachary Space	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee	Transaction ID: SB23-863526 Date of Disbursement 04 / 30 / 2009
	Mailing Address 430 S Capitol Street, SE	Amount of Each Disbursement this Period 11.32
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement In-House Fundraising Services	Category/Type
	Candidate Name Kurt Schrader	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee	Transaction ID: SB23-863527 Date of Disbursement 04 / 30 / 2009
	Mailing Address 430 S Capitol Street, SE	Amount of Each Disbursement this Period 17.48
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement In-House Fundraising Services	Category/Type
	Candidate Name Joseph A Sestak, Jr	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 07	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>38.49</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name Christopher Paul Carney</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 10</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-863528</p> <p>Date of Disbursement MM / DD / YYYY 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 24.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name Jim Langevin</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-863529</p> <p>Date of Disbursement MM / DD / YYYY 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 5.50</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement In-House Fundraising Services</p> <p>Candidate Name Ciro D. Rodriguez</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23-863530</p> <p>Date of Disbursement MM / DD / YYYY 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 6.28</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>36.31</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-House Fundraising Services

Candidate Name  
Solomon Ortiz

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: TX District: 27

Transaction ID: SB23-863531  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-House Fundraising Services

Candidate Name  
Henry Cuellar

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: TX District: 28

Transaction ID: SB23-863532  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-House Fundraising Services

Candidate Name  
Rick Larsen

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: WA District: 02

Transaction ID: SB23-863533  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

**A.** Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-House Fundraising Services

Candidate Name  
Steve L Kagen

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: WI District: 08

Transaction ID: SB23-863534

Date of Disbursement

04 / 30 / 2009

Amount of Each Disbursement this Period

23.75

**B.** Full Name (Last, First, Middle Initial)  
Scott Murphy for Congress

Mailing Address 615 Glen Street

City Glens Falls State NY Zip Code 12801

Purpose of Disbursement

Candidate Name  
Scott H Murphy

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 20

Special

Transaction ID: D16311

Date of Disbursement

04 / 10 / 2009

Amount of Each Disbursement this Period

2500.00

**[MEMO ITEM]**

Earmarked by JOE-PAC Jobs-  
Opportunities & Education  
PAC

**C.** Full Name (Last, First, Middle Initial)  
New York Victory Protection Fu

Mailing Address 1341 G Street, NW  
Suite 740

City Washington State DC Zip Code 20005

Purpose of Disbursement

Candidate Name  
New York Victory Protection Fu

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District: 00

Special

Transaction ID: D16315

Date of Disbursement

04 / 13 / 2009

Amount of Each Disbursement this Period

5000.00

**[MEMO ITEM]**

Earmarked by New Democrat  
Coalition PAC

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

23.75

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) New York Victory Protection Fu	Transaction ID: D16314 Date of Disbursement 04 / 14 / 2009
	Mailing Address 1341 G Street, NW Suite 740	Amount of Each Disbursement this Period 1000.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement	Category/Type
	Candidate Name New York Victory Protection Fu	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special
		<b>[MEMO ITEM]</b> Earmarked by Taking the Hill PAC

B.	Full Name (Last, First, Middle Initial) New York Victory Protection Fu	Transaction ID: D16316 Date of Disbursement 04 / 15 / 2009
	Mailing Address 1341 G Street, NW Suite 740	Amount of Each Disbursement this Period 5000.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement	Category/Type
	Candidate Name New York Victory Protection Fu	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special
		<b>[MEMO ITEM]</b> Earmarked by American Federation of Teachers Committee on Political Education

C.	Full Name (Last, First, Middle Initial) Scott Murphy for Congress	Transaction ID: D16317 Date of Disbursement 04 / 15 / 2009
	Mailing Address 615 Glen Street	Amount of Each Disbursement this Period 5000.00
	City Glens Falls State NY Zip Code 12801	
	Purpose of Disbursement	Category/Type
	Candidate Name Scott H Murphy	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special
		<b>[MEMO ITEM]</b> Earmarked by American Federation of Teachers Committee on Political Education

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	8497.28

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input checked="" type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Bank of America, NA	Transaction ID: SB26-863196 Date of Disbursement MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 730 15th Street, NW	Amount of Each Disbursement this Period 66666.67
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Loan Repayment	Category/ Type
	Candidate Name Bank of America, NA	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Bank of America, NA	Transaction ID: SB26-863247 Date of Disbursement MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 730 15th Street, NW	Amount of Each Disbursement this Period 600000.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Loan Repayment	Category/ Type
	Candidate Name Bank of America, NA	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ..... ►

66666.67

TOTAL This Period (last page this line number only) ..... ►

66666.67

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) John Crawford</p> <p>Mailing Address 2800 Clarendon Blvd. Apt. W613</p> <p>City Arlington State VA Zip Code 22201</p> <p>Purpose of Disbursement Contribution Refund Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-862618 <b>Date of Disbursement</b> 04 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>010 Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mary Keating</p> <p>Mailing Address 9 Trillium Lane</p> <p>City Hilton Head Island State SC Zip Code 29926</p> <p>Purpose of Disbursement Contribution Refund Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-862742 <b>Date of Disbursement</b> 04 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 55.00</p> <p>010 Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Don Laclergue</p> <p>Mailing Address 22 Henry Pl</p> <p>City Millbrae State CA Zip Code 94030</p> <p>Purpose of Disbursement Contribution Refund Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-862743 <b>Date of Disbursement</b> 04 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 120.00</p> <p>010 Category/Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

200.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Karen Martin</p> <p>Mailing Address 700 Arbor Lane</p> <p>City Kennett Square State PA Zip Code 19348</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-863011</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="20.00"/></p> <p>Category/Type: <input type="text" value="010"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Thomas Bennigson</p> <p>Mailing Address 4100 Redwood Rd. Ste. 10</p> <p>City Oakland State CA Zip Code 94619-2363</p> <p>Purpose of Disbursement Earmarked Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-863204</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p> <p>Category/Type: <input type="text"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Kirby Frank</p> <p>Mailing Address 715 Wildwood Place, N.E.</p> <p>City Atlanta State GA Zip Code 30324-4907</p> <p>Purpose of Disbursement Earmarked Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-863215</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p> <p>Category/Type: <input type="text"/></p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Thomas Harvey <hr/> Mailing Address 14 Vasco Dr. <hr/> City Mill Valley State CA Zip Code 94941-1435 <hr/> Purpose of Disbursement Earmarked Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-863216 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Mel Hayden <hr/> Mailing Address 700 James St. <hr/> City Longmont State CO Zip Code 80501-6443 <hr/> Purpose of Disbursement Earmarked Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-863217 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 25.00
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) David Isaacson <hr/> Mailing Address 15 W. 81st St. 13A <hr/> City New York State NY Zip Code 10024-6022 <hr/> Purpose of Disbursement Earmarked Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-863218 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 100.00
	Category/ Type
	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	625.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Aaron Jensen  Mailing Address PSC 82 BOX 135  City APO State AE Zip Code 09710  Purpose of Disbursement Contribution Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-864450 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9  Amount of Each Disbursement this Period 50.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Mark Levinger  Mailing Address 1708 Marshall Ave.  City St. Paul State MN Zip Code 55104-6114  Purpose of Disbursement Earmarked Contribution Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-863220 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9  Amount of Each Disbursement this Period 30.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Barry Lipman  Mailing Address 3320 Jackson St.  City San Francisco State CA Zip Code 94118  Purpose of Disbursement Earmarked Contribution Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-863221 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9  Amount of Each Disbursement this Period 2100.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

2180.00

**TOTAL** This Period (last page this line number only) ..... ▶



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Michael Mockovak</p> <p>Mailing Address 15301 SE 80th St.</p> <p>City Newcastle State WA Zip Code 98059-9243</p> <p>Purpose of Disbursement Earmarked Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-863225</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 15.00</p> <p>Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) April Bowen</p> <p>Mailing Address 327 Lake Street</p> <p>City Fort Morgan State CO Zip Code 80701</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-864449</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) David Patronella</p> <p>Mailing Address 5001 Happy Hollow Street</p> <p>City Houston State TX Zip Code 77018-1230</p> <p>Purpose of Disbursement Earmarked Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-863226</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 20.00</p> <p>Category/Type</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>85.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) John Ratliff</p> <p>Mailing Address 15305 Darrow Rd.</p> <p>City Vermillion State OH Zip Code 44089-9608</p> <p>Purpose of Disbursement Earmarked Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-863227</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 10.00</p> <p>Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Brian Regan</p> <p>Mailing Address 211 W. 56th St.</p> <p>City New York State NY Zip Code 10019-4327</p> <p>Purpose of Disbursement Earmarked Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-863228</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Tim Rogers</p> <p>Mailing Address 720 N. Person St.</p> <p>City Raleigh State NC Zip Code 27604-1287</p> <p>Purpose of Disbursement Earmarked Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-863229</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>Category/Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

85.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Jaimie Ross  Mailing Address 1104 Mor Bihan St.  City Tallahassee State FL Zip Code 32301-5725  Purpose of Disbursement Earmarked Contribution Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-863230 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9  Amount of Each Disbursement this Period 200.00
B.	Full Name (Last, First, Middle Initial) Carole Ryan  Mailing Address 717 Carlisle Way  City Sunnyvale State CA Zip Code 94087-3428  Purpose of Disbursement Earmarked Contribution Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-863231 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9  Amount of Each Disbursement this Period 20.00
C.	Full Name (Last, First, Middle Initial) Paul Sawi  Mailing Address 2934 Avalon Ave.  City Berkeley State CA Zip Code 94705-1402  Purpose of Disbursement Earmarked Contribution Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-863232 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9  Amount of Each Disbursement this Period 500.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	720.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b> Full Name (Last, First, Middle Initial) John Scharffenberger <hr/> Mailing Address PO Box 550 <hr/> City Philo State CA Zip Code 95466-0550 <hr/> Purpose of Disbursement Earmarked Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-863233 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 250.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Carl Shapiro <hr/> Mailing Address 19 Tolan Way <hr/> City Lafayette State CA Zip Code 94549-2723 <hr/> Purpose of Disbursement Earmarked Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-863234 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Harry Sherr <hr/> Mailing Address 36 Old Farm Rd. <hr/> City Wellesley State MA Zip Code 02481-1443 <hr/> Purpose of Disbursement Earmarked Contribution Refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A-863235 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1250.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Nelson Burstein  Mailing Address 14 Cedar Hill Rd.  City Dover State MA Zip Code 02030-1624  Purpose of Disbursement Earmarked Contribution Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-863206 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9	Amount of Each Disbursement this Period  50.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Richard Silver  Mailing Address 1008 10th St. # 217  City Sacramento State CA Zip Code 95814-3502  Purpose of Disbursement Earmarked Contribution Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-863236 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9	Amount of Each Disbursement this Period  500.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Thomas Solomon  Mailing Address 1512 Eagle Ridge Rd., N.E.  City Albuquerque State NM Zip Code 87122-1155  Purpose of Disbursement Earmarked Contribution Refund Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB28A-863237 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9	Amount of Each Disbursement this Period  50.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>600.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Kenneth Stokem</p> <p>Mailing Address 1001 Maple Hill Rd.</p> <p>City Castleton State NY Zip Code 12033-9657</p> <p>Purpose of Disbursement Earmarked Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-863238</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 5.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Robert Stuart</p> <p>Mailing Address 13149 Clairepointe Way</p> <p>City Oakland State CA Zip Code 94619-3505</p> <p>Purpose of Disbursement Earmarked Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-863239</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 10.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Gregory Urban</p> <p>Mailing Address 5304 Roy Ballard St.</p> <p>City Denver State NC Zip Code 28037-8720</p> <p>Purpose of Disbursement Earmarked Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-863240</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 25.00</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

40.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.	Full Name (Last, First, Middle Initial) Hal Varian	Transaction ID: SB28A-863241
	Mailing Address 1198 Estates Dr.	Date of Disbursement MM / DD / YYYY 04 / 30 / 2009
	City Lafayette State CA Zip Code 94549-2749	Amount of Each Disbursement this Period 200.00
	Purpose of Disbursement Earmarked Contribution Refund	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Ronald Yoshiyama	Transaction ID: SB28A-864451
	Mailing Address 3410 Cutter Place	Date of Disbursement MM / DD / YYYY 04 / 30 / 2009
	City Davis State CA Zip Code 95616	Amount of Each Disbursement this Period 10.00
	Purpose of Disbursement Contribution Refund	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mark Carlton	Transaction ID: SB28A-863207
	Mailing Address 10408 Alabama Circle	Date of Disbursement MM / DD / YYYY 04 / 30 / 2009
	City Bloomington State MN Zip Code 55438-1835	Amount of Each Disbursement this Period 10.00
	Purpose of Disbursement Earmarked Contribution Refund	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	220.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Kelly Chapman</p> <p>Mailing Address 27600 Pacific Coast Hwy.</p> <p>City Malibu State CA Zip Code 90265-4340</p> <p>Purpose of Disbursement Earmarked Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-863208</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Kelly Chapman</p> <p>Mailing Address 27600 Pacific Coast Hwy.</p> <p>City Malibu State CA Zip Code 90265-4340</p> <p>Purpose of Disbursement Earmarked Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-863209</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Kelly Chapman</p> <p>Mailing Address 27600 Pacific Coast Hwy.</p> <p>City Malibu State CA Zip Code 90265-4340</p> <p>Purpose of Disbursement Earmarked Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-863210</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Category/Type</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	750.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Gabriel Chin</p> <p>Mailing Address 7573 E. Placita de la Vina</p> <p>City Tucson State AZ Zip Code 85750-7250</p> <p>Purpose of Disbursement Earmarked Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-863211</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 5.00</p> <p>Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Charilyn Cowan</p> <p>Mailing Address 6440 Tucker Ave.</p> <p>City McLean State VA Zip Code 22101-5265</p> <p>Purpose of Disbursement Earmarked Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-863212</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 20.00</p> <p>Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Brian Drygas</p> <p>Mailing Address 7033 Queenswood Ct.</p> <p>City San Jose State CA Zip Code 95120-3336</p> <p>Purpose of Disbursement Earmarked Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB28A-863213</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 10.00</p> <p>Category/Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

35.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)  
David Duncan

Transaction ID: SB28A-863214  
Date of Disbursement

Mailing Address 10553 W. Heceta Head Dr.

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	0	9

City State Zip Code  
Boise ID 83714-3658

Amount of Each Disbursement this Period

10.00
-------

Purpose of Disbursement  
Earmarked Contribution Refund

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) .....

10.00

TOTAL This Period (last page this line number only) .....

7440.00



**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee Democratic Congressional Campaign Committee
If YES, name the designating committee: Democratic National Committee & New York State Democratic Cmte	Mailing Address 430 South Capitol Street, SE 2nd Floor City: Washington State: DC ZIP Code: 20003

  

Full Name (Last, First, Middle Initial) of Each Payee Daniel Gray	Purpose of Expenditure Travel
Mailing Address 5774 Colonial Blvd	002 Category/Type
City: Willoughby State: OH ZIP Code: 44094	Date: 04 / 17 / 2009
Name of Federal Candidate Supported: H. Scott Murphy Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 20	Amount: 414.51
Aggregate General Election Expenditure for this Candidate ▶ 79216.20	Transaction ID: SF-862780

  

Full Name (Last, First, Middle Initial) of Each Payee Bank of America	Purpose of Expenditure Travel
Mailing Address P.O. Box 53155	002 Category/Type
City: Phoenix State: AZ ZIP Code: 85072-3155	See Attached Memo Entry
Name of Federal Candidate Supported: H. Scott Murphy Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 20	Date: 04 / 22 / 2009
Aggregate General Election Expenditure for this Candidate ▶ 79216.20	Amount: 122.00
	Transaction ID: SF-862935

  

Full Name (Last, First, Middle Initial) of Each Payee AMTRAK	Purpose of Expenditure Travel
Mailing Address 1 Raymond Plz W	002 Category/Type
City: Newark State: NJ ZIP Code: 07102	Memo Entry
Name of Federal Candidate Supported: H. Scott Murphy Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY District: 20	Date: 03 / 16 / 2009
Aggregate General Election Expenditure for this Candidate ▶ 0.00	Amount: 122.00
	Transaction ID: SF-862935-10000

  

SUBTOTAL of Expenditures This Page (optional) .....	536.51
TOTAL This Period (last page this line number only) .....	

