



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

Write or Type Committee Name  
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

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		-1657.95
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	-4915.19									
(c) Total Receipts (from Line 19) .....	7762.00	21182.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	2846.81	19524.05								
7. Total Disbursements (from Line 31) .....	6355.65	23032.89								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	-3508.84	-3508.84								
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) .....	50737.82									

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

JEWISH COUNCIL FOR EDUCATION AND RESEARCH

Report Covering the Period: From:    To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	6450.00	15450.00
(ii) Unitemized .....	275.00	275.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	6725.00	15725.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	6725.00	15725.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	1000.00	5320.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	37.00	137.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	37.00	137.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	7762.00	21182.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	7725.00	21045.00

## DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	209.00
(ii) Non-Federal Share.....	0.00	209.00
(b) Other Federal Operating Expenditures.....	6074.37	20353.61
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	6074.37	20771.61
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	1980.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	281.28	281.28
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) 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))..	6355.65	23032.89
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6355.65	22823.89

**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) .....	6725.00	15725.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6725.00	15725.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	6074.37	20562.61
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6074.37	20562.61

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

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

FOR LINE NUMBER: PAGE 6 / 26  
(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)  
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

**A.** Full Name (Last, First, Middle Initial)  
Amy Dixon

Mailing Address 365 Irving Avenue

City State Zip Code  
South Orange NJ 07079

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

Name of Employer Occupation  
Jewish Funds for Justice COO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 25 / 2009

**Transaction ID:** SA11AI.8120

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Ari Holtzblatt

Mailing Address 133 Canner Street

City State Zip Code  
New Haven CT 06511

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

Name of Employer Occupation  
None Student

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 20 / 2009

**Transaction ID:** SA11AI.8129

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mikhael Moore

Mailing Address 630 Fort Washington Ave

City State Zip Code  
New York NY 10040

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

Name of Employer Occupation  
Jewish Funds for Justice CCO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 27 / 2009

**Transaction ID:** SA11AI.8114

Amount of Each Receipt this Period  
500.00

**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 7 / 26

(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)  
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

**A.**

Full Name (Last, First, Middle Initial)  
Mikhael Moore

Mailing Address 630 Fort Washington Ave

City State Zip Code  
New York NY 10040

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

Name of Employer Occupation  
Jewish Funds for Justice CCO

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 4950.00

Date of Receipt

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

Transaction ID: SA11AI.8115

Amount of Each Receipt this Period  
450.00

**B.**

Full Name (Last, First, Middle Initial)  
Marion Usher

Mailing Address 2021 Hilyer Place, NW

City State Zip Code  
Washington DC 20009

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

Name of Employer Occupation  
Self Therapist

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 8 / 2 5 / 2 0 0 9

Transaction ID: SA11AI.8118

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Marion Usher

Mailing Address 2021 Hilyer Place, NW

City State Zip Code  
Washington DC 20009

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

Name of Employer Occupation  
Self Therapist

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt

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

Transaction ID: SA11AI.8125

Amount of Each Receipt this Period  
500.00

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

1950.00

**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 8 / 26  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

**A.** Full Name (Last, First, Middle Initial)  
Marion Usher

Mailing Address 2021 Hilyer Place, NW

City State Zip Code  
Washington DC 20009

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

Name of Employer Self Occupation  
Therapist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
10 / 26 / 2009

**Transaction ID:** SA11AI.8122

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Marion Usher

Mailing Address 2021 Hilyer Place, NW

City State Zip Code  
Washington DC 20009

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

Name of Employer Self Occupation  
Therapist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4500.00

Date of Receipt  
MM / DD / YYYY  
12 / 14 / 2009

**Transaction ID:** SA11AI.8131

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00

**TOTAL** This Period (last page this line number only) ..... ► 6450.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 9 / 26	
	(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"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full) JEWISH COUNCIL FOR EDUCATION AND RESEARCH
--

A.

Full Name (Last, First, Middle Initial) National Jewish Democratic Council		Date of Receipt
Mailing Address P.O. Box 75308		<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
City	State	Zip Code
Washington	DC	20013
FEC ID number of contributing federal political committee.		Transaction ID: SA17.8123
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="1000.00"/>
Occupation		List Purchase-Fair Market Value
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="1000.00"/>

SUBTOTAL of Receipts This Page (optional) .....	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only) .....	<input type="text" value="1000.00"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

A.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB21B.8062 Date of Disbursement 07 / 05 / 2009
	Mailing Address PO Box 260180	Amount of Each Disbursement this Period 391.00
	City Baton Rouge State LA Zip Code 70826	
	Purpose of Disbursement Credit Card Payment -Credit Card 1	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) Chase	Transaction ID: SB21B.8101 Date of Disbursement 07 / 06 / 2009
	Mailing Address PO Box 260180	Amount of Each Disbursement this Period 324.94
	City Baton Rouge State LA Zip Code 70826	
	Purpose of Disbursement Finance Charges - Credit Card 2	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) Chase	Transaction ID: SB21B.8094 Date of Disbursement 07 / 18 / 2009
	Mailing Address PO Box 260180	Amount of Each Disbursement this Period 200.32
	City Baton Rouge State LA Zip Code 70826	
	Purpose of Disbursement Finance Charges - Credit Card 1	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) .....	▶	391.00
<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)  
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

A.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB21B.8061 Date of Disbursement
	Mailing Address PO Box 260180	<input type="text" value="07"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Baton Rouge State LA Zip Code 70826	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Payment -Credit Card 2	<input type="text" value="621.00"/>
	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.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB21B.8102 Date of Disbursement
	Mailing Address PO Box 260180	<input type="text" value="08"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Baton Rouge State LA Zip Code 70826	Amount of Each Disbursement this Period
	Purpose of Disbursement Finance Charges - Credit Card 2	<input type="text" value="333.49"/>
	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) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB21B.8064 Date of Disbursement
	Mailing Address PO Box 260180	<input type="text" value="08"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Baton Rouge State LA Zip Code 70826	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Payment -Credit Card 1	<input type="text" value="383.00"/>
	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="1004.00"/>
<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)

<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)  
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

A.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB21B.8095 Date of Disbursement 08 / 18 / 2009
	Mailing Address PO Box 260180	Amount of Each Disbursement this Period 265.67
	City Baton Rouge State LA Zip Code 70826	
	Purpose of Disbursement Finance Charges - Credit Card 1	[MEMO ITEM]
	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) Chase	Transaction ID: SB21B.8074 Date of Disbursement 08 / 25 / 2009
	Mailing Address PO Box 260180	Amount of Each Disbursement this Period 15.00
	City Baton Rouge State LA Zip Code 70826	
	Purpose of Disbursement Bank Charge	[MEMO ITEM]
	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) Chase	Transaction ID: SB21B.8063 Date of Disbursement 08 / 26 / 2009
	Mailing Address PO Box 260180	Amount of Each Disbursement this Period 627.00
	City Baton Rouge State LA Zip Code 70826	
	Purpose of Disbursement Credit Card Payment -Credit Card 2	[MEMO ITEM]
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>642.00</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)

<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)  
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

A.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB21B.8076 Date of Disbursement
	Mailing Address PO Box 260180	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Baton Rouge State LA Zip Code 70826	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Charge	<input type="text" value="16.00"/>
	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.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB21B.8105 Date of Disbursement
	Mailing Address PO Box 260180	<input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City Baton Rouge State LA Zip Code 70826	Amount of Each Disbursement this Period
	Purpose of Disbursement Finance Charges - Credit Card 2	<input type="text" value="330.08"/>
	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) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB21B.8065 Date of Disbursement
	Mailing Address PO Box 260180	<input type="text" value="09"/> / <input type="text" value="09"/> / <input type="text" value="2009"/>
	City Baton Rouge State LA Zip Code 70826	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Payment -Credit Card 1	<input type="text" value="448.00"/>
	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="464.00"/>
<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)

<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)  
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

A.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB21B.8096 Date of Disbursement 09 / 18 / 2009
	Mailing Address PO Box 260180	Amount of Each Disbursement this Period 263.33
	City Baton Rouge State LA Zip Code 70826	
	Purpose of Disbursement Finance Charges - Credit Card 1	[MEMO ITEM]
	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) Chase	Transaction ID: SB21B.8075 Date of Disbursement 09 / 30 / 2009
	Mailing Address PO Box 260180	Amount of Each Disbursement this Period 16.00
	City Baton Rouge State LA Zip Code 70826	
	Purpose of Disbursement Bank Charge	[MEMO ITEM]
	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) Chase	Transaction ID: SB21B.8066 Date of Disbursement 10 / 01 / 2009
	Mailing Address PO Box 260180	Amount of Each Disbursement this Period 621.00
	City Baton Rouge State LA Zip Code 70826	
	Purpose of Disbursement Credit Card Payment -Credit Card 2	[MEMO ITEM]
	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) .....	637.00
<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)  
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

A.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB21B.8078 Date of Disbursement
	Mailing Address PO Box 260180	<input type="text" value="10"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Baton Rouge State LA Zip Code 70826	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Charge	<input type="text" value="25.00"/>
	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.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB21B.8108 Date of Disbursement
	Mailing Address PO Box 260180	<input type="text" value="10"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Baton Rouge State LA Zip Code 70826	Amount of Each Disbursement this Period
	Purpose of Disbursement Finance Charges - Credit Card 2	<input type="text" value="317.42"/>
	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) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB21B.8067 Date of Disbursement
	Mailing Address PO Box 260180	<input type="text" value="10"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Baton Rouge State LA Zip Code 70826	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Payment -Credit Card 1	<input type="text" value="444.00"/>
	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="469.00"/>
<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)

<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)  
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Chase</p> <p>Mailing Address PO Box 260180</p> <p>City Baton Rouge State LA Zip Code 70826</p> <p>Purpose of Disbursement Finance Charges - Credit Card 1</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.8097</p> <p>Date of Disbursement 10 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 252.96</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Chase</p> <p>Mailing Address PO Box 260180</p> <p>City Baton Rouge State LA Zip Code 70826</p> <p>Purpose of Disbursement Credit Card Payment -Credit Card 2</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.8068</p> <p>Date of Disbursement 10 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 605.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Chase</p> <p>Mailing Address PO Box 260180</p> <p>City Baton Rouge State LA Zip Code 70826</p> <p>Purpose of Disbursement Bank Charge</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.8077</p> <p>Date of Disbursement 10 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 16.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>621.00</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)

<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)  
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

A.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB21B.8110 Date of Disbursement																			
	Mailing Address PO Box 260180	<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>1</td><td>1</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>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	6	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	0	6	/	2	0	0	9												
	City Baton Rouge State LA Zip Code 70826	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Finance Charges - Credit Card 2	<table border="1"><tr><td>324.27</td></tr></table>	324.27																		
324.27																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]																			
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

B.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB21B.8069 Date of Disbursement																			
	Mailing Address PO Box 260180	<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>1</td><td>1</td><td>/</td><td>1</td><td>0</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	1	1	/	1	0	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	0	/	2	0	0	9												
	City Baton Rouge State LA Zip Code 70826	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Credit Card Payment -Credit Card 1	<table border="1"><tr><td>431.00</td></tr></table>	431.00																		
431.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]																			
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

C.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB21B.8098 Date of Disbursement																			
	Mailing Address PO Box 260180	<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>1</td><td>1</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>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	8	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	8	/	2	0	0	9												
	City Baton Rouge State LA Zip Code 70826	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Finance Charges - Credit Card 1	<table border="1"><tr><td>258.15</td></tr></table>	258.15																		
258.15																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]																			
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>431.00</td></tr></table>	431.00
431.00		
<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)

<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)  
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

A.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB21B.8070 Date of Disbursement
	Mailing Address PO Box 260180	<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Baton Rouge State LA Zip Code 70826	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Payment -Credit Card 2	<input type="text" value="609.00"/>
	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.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB21B.8079 Date of Disbursement
	Mailing Address PO Box 260180	<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Baton Rouge State LA Zip Code 70826	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Charge	<input type="text" value="16.00"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB21B.8111 Date of Disbursement
	Mailing Address PO Box 260180	<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City Baton Rouge State LA Zip Code 70826	Amount of Each Disbursement this Period
	Purpose of Disbursement Finance Charges - Credit Card 2	<input type="text" value="316.89"/>
	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) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="625.00"/>
<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)

<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)  
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

<b>A.</b> Full Name (Last, First, Middle Initial) Chase Mailing Address PO Box 260180 City Baton Rouge State LA Zip Code 70826 Purpose of Disbursement Credit Card Payment -Credit Card 1 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.8071 Date of Disbursement 12 / 11 / 2009
	Amount of Each Disbursement this Period 153.72
	Category/ Type
	[MEMO ITEM]

<b>B.</b> Full Name (Last, First, Middle Initial) Chase Mailing Address PO Box 260180 City Baton Rouge State LA Zip Code 70826 Purpose of Disbursement Finance Charges - Credit Card 1 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.8099 Date of Disbursement 12 / 18 / 2009
	Amount of Each Disbursement this Period 247.46
	Category/ Type
	[MEMO ITEM]

<b>C.</b> Full Name (Last, First, Middle Initial) Chase Mailing Address PO Box 260180 City Baton Rouge State LA Zip Code 70826 Purpose of Disbursement Credit Card Payment -Credit Card 2 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.8072 Date of Disbursement 12 / 28 / 2009
	Amount of Each Disbursement this Period 593.00
	Category/ Type
	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	746.72
<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 20 / 26

<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)  
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

A.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB21B.8080 Date of Disbursement 12 / 31 / 2009
	Mailing Address PO Box 260180	Amount of Each Disbursement this Period 16.00
	City Baton Rouge State LA Zip Code 70826	
	Purpose of Disbursement Bank Charge 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) Godaddy.com	Transaction ID: SB21B.8100 Date of Disbursement 08 / 05 / 2009
	Mailing Address	Amount of Each Disbursement this Period 29.99
	City State Zip Code	
	Purpose of Disbursement Internet Access-Credit Card 2 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) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Vonage	Transaction ID: SB21B.8086 Date of Disbursement 06 / 25 / 2009
	Mailing Address 23 Main Street	Amount of Each Disbursement this Period 25.60
	City Holmdel State NJ Zip Code 07733	
	Purpose of Disbursement Phones - Credit Card 1 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) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	16.00
<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 21 / 26

<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)  
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

A.

Full Name (Last, First, Middle Initial)

Vonage

Mailing Address 23 Main Street

City State Zip Code  
Holmdel NJ 07733

Purpose of Disbursement

Phones - Credit Card 1

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB21B.8091

Date of Disbursement

07 / 25 / 2009

Amount of Each Disbursement this Period

72.04

[MEMO ITEM]

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

0.00

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

6046.72

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Chase			Nature of Debt (Purpose): Credit Card 1
Mailing Address PO Box 260180			
City Baton Rouge	State LA	ZIP Code 70826	

Outstanding Balance Beginning This Period <input type="text" value="665.19"/>		<b>Transaction ID: SD10.7861</b>	
Amount Incurred This Period <input type="text" value="1585.53"/>	Payment This Period <input type="text" value="2250.72"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Chase			Nature of Debt (Purpose): Credit Card 2
Mailing Address PO Box 260180			
City Baton Rouge	State LA	ZIP Code 70826	

Outstanding Balance Beginning This Period <input type="text" value="29372.00"/>		<b>Transaction ID: SD10.8023</b>	
Amount Incurred This Period <input type="text" value="1970.80"/>	Payment This Period <input type="text" value="3676.00"/>	Outstanding Balance at Close of This Period <input type="text" value="27666.80"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Jewish Journal			Nature of Debt (Purpose): Advertising
Mailing Address 1701B Green Road			
City Deerfield Beach	State FL	ZIP Code 33064	

Outstanding Balance Beginning This Period <input type="text" value="911.80"/>		<b>Transaction ID: SD10.7872</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="281.28"/>	Outstanding Balance at Close of This Period <input type="text" value="630.52"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="28297.32"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Revise Films			Nature of Debt (Purpose): Film Production
Mailing Address Rechov HaRav			
City Jerusalem	State ZZ	ZIP Code	

Outstanding Balance Beginning This Period 1500.00		<b>Transaction ID:</b> SD10.7796	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Sandler, Reiff & Young, PC			Nature of Debt (Purpose): Legal Services
Mailing Address 300 M Street, SE Suite 1102			
City Washington	State DC	ZIP Code 20003	

Outstanding Balance Beginning This Period 2692.50		<b>Transaction ID:</b> SD10.7900	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2692.50	

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor St. Louis Jewish Light			Nature of Debt (Purpose): Advertising
Mailing Address 6 Millstone Campus			
City St. Louis	State MO	ZIP Code 63146	

Outstanding Balance Beginning This Period 16898.00		<b>Transaction ID:</b> SD10.7860	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 16898.00	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	▶	21090.50
<b>2) TOTALS</b> This Period (last page this line number only).....	▶	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 24 / 26	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**JEWISH COUNCIL FOR EDUCATION AND RESEARCH**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Studio Guild			Nature of Debt (Purpose): Rent
Mailing Address 18 W 27th Street			
City New York	State NY	ZIP Code 10001	

Outstanding Balance Beginning This Period		<b>Transaction ID: SD10.7899</b>	
1350.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	1350.00	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	1350.00
2) <b>TOTALS</b> This Period (last page this line number only).....	50737.82
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	50737.82

**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)

PAGE 25 / 26  
 FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) JEWISH COUNCIL FOR EDUCATION AND RESEARCH	
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, name the designating committee:	Full Name of Subordinate Committee  Mailing Address  City _____ State _____ ZIP Code _____

Full Name (Last, First, Middle Initial) of Each Payee Jewish Journal	Purpose of Expenditure Newspaper Advertisement Category/Type
Mailing Address 1701B Green Road	Date M M / D D / Y Y Y Y 1 2 / 1 1 / 2 0 0 9
City _____ State _____ ZIP Code _____ Deerfield Beach _____ FL _____ 33064	
Name of Federal Candidate Supported BARACK OBAMA	Office Sought: _____ <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential
State: _____ District: 00	Amount 281.28
Aggregate General Election Expenditure for this Candidate ►	281.28 Transaction ID: SF.8073

<b>SUBTOTAL</b> of Expenditures This Page (optional) ..... ►	281.28
<b>TOTAL</b> This Period (last page this line number only) ..... ►	281.28

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 JEWISH COUNCIL FOR EDUCATION AND RESEARCH

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
JCER Non-Federal Account	M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 9	37.00

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	37.00	Transaction ID: H3.8132
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	37.00
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	0.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred) .....	37.00