

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
Progressive Patriots Fund

ADDRESS (number and street) PO Box 628008
 Check if different than previously reported. (ACC)
Middleton WI 53562

2. **FEC IDENTIFICATION NUMBER** C00409136
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 06 01 2006 through 06 30 2006

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 Cole F Leystra-Assistant Treasurer

Signature of Treasurer Electronically Filed by Cole F Leystra-Assistant Treasurer Date 07 20 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Progressive Patriots Fund

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 6 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

 To:

| | |
|---|---|
| M | M |
| 0 | 6 |

| | |
|---|---|
| D | D |
| 3 | 0 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date | | | | | | | | |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|-----------|
| 6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><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>6</td></tr></table> | Y | Y | Y | Y | 2 | 0 | 0 | 6 | | 289119.18 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 0 | 6 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 545627.82 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 95385.87 | 956834.84 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 641013.69 | 1245954.02 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 354882.08 | 959822.41 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 286131.61 | 286131.61 | | | | | | | | |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Progressive Patriots Fund

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 6 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

 To:

| | |
|---|---|
| M | M |
| 0 | 6 |

| | |
|---|---|
| D | D |
| 3 | 0 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

| 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 | 42907.89 | 411707.69 |
| (i) Itemized (use Schedule A) | 51807.41 | 543483.36 |
| (ii) Unitemized | 94715.30 | 955191.05 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 218.84 |
| (c) Other Political Committees (such as PACs) | 94715.30 | 955409.89 |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | | |
| 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 | 418.03 |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 670.57 | 1006.92 |
| 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)) | 95385.87 | 956834.84 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 95385.87 | 956834.84 |

DETAILED SUMMARY PAGE

of Disbursements

| 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 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures..... | 285657.08 | 817897.41 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... | 285657.08 | 817897.41 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 49100.00 | 114800.00 |
| 24. Independent Expenditure (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 125.00 | 6075.00 |
| (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)) | 125.00 | 6075.00 |
| 29. Other Disbursements..... | 20000.00 | 21050.00 |
| 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)).. | 354882.08 | 959822.41 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... | 354882.08 | 959822.41 |

DETAILED SUMMARY PAGE
of Disbursements

| 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 | 94715.30 | 955409.89 |
| 34. Total Contribution Refunds (from Line 28(d)) | 125.00 | 6075.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 94590.30 | 949334.89 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 285657.08 | 817897.41 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 418.03 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 285657.08 | 817479.38 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 6 / 118 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <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)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
788.61

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 0 | 2 | / | 2 | 0 | 0 | 6 |

Transaction ID: SA11A1.39682

Amount of Each Receipt this Period
35.00

Earmarked Contributions:
See Memo Text

B. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
813.61

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 0 | 8 | / | 2 | 0 | 0 | 6 |

Transaction ID: SA11A1.39687

Amount of Each Receipt this Period
25.00

Earmarked Contributions:
See Memo Text

C. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
824.49

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 1 | 5 | / | 2 | 0 | 0 | 6 |

Transaction ID: SA11A1.39690

Amount of Each Receipt this Period
10.88

Earmarked Contributions:
See Memo Text

| | | |
|--|---|-------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 70.88 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 / 118 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
869.49

Date of Receipt
M M / D D / Y Y Y Y
06 / 22 / 2006

Transaction ID: SA11A1.39693

Amount of Each Receipt this Period
45.00

Earmarked Contributions:
See Memo Text

B. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
964.49

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2006

Transaction ID: SA11A1.39696

Amount of Each Receipt this Period
95.00

Earmarked Contributions:
See Memo Text

C. Full Name (Last, First, Middle Initial)
Michael Arkes

Mailing Address 641 W. Willow #138

City State Zip Code
Chicago IL 60614

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

Name of Employer Occupation
Hinda Inc. CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 21 / 2006

Transaction ID: SA11A1.36906

Amount of Each Receipt this Period
1000.00

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1140.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 / 118 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
Burton Babetch

Mailing Address 3 Greenbriar East Drive

City State Zip Code
Deerfield IL 60015

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

Name of Employer @Biz Occupation
CPA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 21 / 2006

Transaction ID: SA11A1.36913

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Joel Baer

Mailing Address 11 Kenmore Ave

City State Zip Code
Deerfield IL 60015

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

Name of Employer Self-Employed Occupation
Commodities Trader

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 21 / 2006

Transaction ID: SA11A1.36919

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Donna Bergman

Mailing Address S2574 County Rd. V.

City State Zip Code
Reedsburg WI 53959

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

Name of Employer Retired Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 07 / 2006

Transaction ID: SA11A1.37016

Amount of Each Receipt this Period
55.00

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1305.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 / 118 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
Meredith Bluhm-Wolf

Mailing Address 2430 N. Lakeview Ave
#2N

City Chicago State IL Zip Code 60614

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 ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 0 / 2 0 0 6

Transaction ID: SA11A1.37057

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Victoria Brago

Mailing Address 3646 Dunn Drive Apt. 202

City Los Angeles State CA Zip Code 90034

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

Name of Employer Retired 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 6 / 2 1 / 2 0 0 6

Transaction ID: SA11A1.37101

Amount of Each Receipt this Period
25.00

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

Mailing Address 679 W Hill Road

City Putney State VT Zip Code 05346

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

Name of Employer Everyone's Books Occupation Owner

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 6 / 2 3 / 2 0 0 6

Transaction ID: SA11A1.37113

Amount of Each Receipt this Period
250.00

| | | |
|--|---|--------|
| 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) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 / 118 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
Laurel Imig Britton

Mailing Address 252 Seventh Avenue #PHT

City State Zip Code
New York NY 10001

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

Name of Employer Self-Employed Occupation
Self-Employed Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2006

Transaction ID: SA11A1.37129

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Joan Brodsky

Mailing Address 1223 North Astor St

City State Zip Code
Chicago IL 60610

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

Name of Employer Self-Employed Occupation
Self-Employed Volunteer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
06 / 26 / 2006

Transaction ID: SA11A1.37133

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Nina Brottman

Mailing Address 711 W. Hackberry Dr.

City State Zip Code
Arlington Heights IL 60004

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

Name of Employer Self-Employed Occupation
Self-Employed Bookkeeper

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
06 / 21 / 2006

Transaction ID: SA11A1.37143

Amount of Each Receipt this Period
250.00

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1250.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|---------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 11 / 118 |
| | <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)
Progressive Patriots Fund

| | | | |
|---|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. Jan Brunkow | | Date of Receipt M M / D D / Y Y Y Y 06 / 08 / 2006 | |
| Mailing Address 5877 St Road 25 N | | Transaction ID: SA11A1.37159 | |
| City Nelson | State WY | Zip Code 54756 | Amount of Each Receipt this Period 500.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Retired | Occupation Retired | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | | |

| | | | |
|---|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. John Buttita | | Date of Receipt M M / D D / Y Y Y Y 06 / 14 / 2006 | |
| Mailing Address 10 S. Wacker Drive No. 3700 | | Transaction ID: SA11A1.37189 | |
| City Chicago | State IL | Zip Code 60606 | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer The Northern Trust Company | Occupation Partner | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | | |

| | | | |
|---|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. Howard Cavalero | | Date of Receipt M M / D D / Y Y Y Y 06 / 19 / 2006 | |
| Mailing Address 30 Fernwood Ave | | Transaction ID: SA11A1.37234 | |
| City Roseland | State NJ | Zip Code 07068 | Amount of Each Receipt this Period 500.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Not Employed | Occupation Not Employed | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 1250.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 / 118 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

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

Mailing Address 1248 West Wrightwood Ave

City State Zip Code
Chicago IL 60614

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

Name of Employer Not Employed
Occupation Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
06 / 26 / 2006

Transaction ID: SA11A1.37306

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Daniel Collins

Mailing Address 4811 W Parkview Dr

City State Zip Code
Mequon WI 53092

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

Name of Employer Engage Networks
Occupation Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2006

Transaction ID: SA11A1.37316

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Gary Cozette

Mailing Address 434 W. Aldine Ave. #3-A

City State Zip Code
Chicago IL 60657

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

Name of Employer Chicago Religious Leaders-hip
Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
06 / 26 / 2006

Transaction ID: SA11A1.37348

Amount of Each Receipt this Period
250.00

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) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 13 / 118 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Alan Cravitz | | Date of Receipt MM / DD / YYYY 06 / 14 / 2006 |
| Mailing Address 2234 N. Burling Street | | Transaction ID: SA11A1.37354 |
| City Chicago | State IL | Zip Code 60614 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Development Management Company | Occupation President | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Claire Cukla | | Date of Receipt MM / DD / YYYY 06 / 21 / 2006 |
| Mailing Address N51 W34951 Lake Drive PO Box 592 | | Transaction ID: SA11A1.37366 |
| City Okauchee | State WI | Zip Code 53069 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| Name of Employer Harley Davidson Motor Company | Occupation Maintenance Analyst | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 400.00 | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Laurie David | | Date of Receipt MM / DD / YYYY 06 / 01 / 2006 |
| Mailing Address 15332 Antioch St #168 | | Transaction ID: SA11A1.37403 |
| City Pacific Palisades | State CA | Zip Code 90272 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2000.00 |
| Name of Employer Self-Employed | Occupation Producer | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2000.00 | |

| | |
|--|----------------|
| 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) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 14 / 118 |
| | (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)
Progressive Patriots Fund

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) A. Elaine Davis | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 6 | |
| Mailing Address 587 Ingelside Place | | Transaction ID: SA11A1.37413 | |
| City State Zip Code Evanston IL 60201 | Amount of Each Receipt this Period 1000.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Student | Occupation Student | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) B. Linda Dickens | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 6 | |
| Mailing Address 2590 Fairford Ln. | | Transaction ID: SA11A1.37460 | |
| City State Zip Code Northbrook IL 60062 | Amount of Each Receipt this Period 250.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Homemaker | Occupation Homemaker | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | | |

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) C. Lisa Dykhoff | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 6 | |
| Mailing Address 18680 N SR 9 | | Transaction ID: SA11A1.37524 | |
| City State Zip Code Summitville IN 46070 | Amount of Each Receipt this Period 65.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Perfect Circle Credit Uni- on | Occupation Management | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 215.00 | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 1315.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 15 / 118 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
Lisa Dykhoff

Mailing Address 18680 N SR 9

City State Zip Code
Summitville IN 46070

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

Name of Employer Occupation
Perfect Circle Credit Union Management

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 23 / 2006

Transaction ID: SA11A1.37523

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
George Egan

Mailing Address 4195 S Big Bend Rd

City State Zip Code
Waukesha WI 53189

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1090.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 07 / 2006

Transaction ID: SA11A1.37535

Amount of Each Receipt this Period
90.00

C. Full Name (Last, First, Middle Initial)
Jeanne Eisenstadt

Mailing Address 2003 Leila Dr

City State Zip Code
Loveland CO 80538

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 14 / 2006

Transaction ID: SA11A1.37541

Amount of Each Receipt this Period
150.00

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 265.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 16 / 118 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
Stanley Eskin

Mailing Address 133 Jordan Rd

City State Zip Code
Brookline MA 02446

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

Name of Employer Retired 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
06 / 20 / 2006

Transaction ID: SA11A1.37570

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
Jon Fox

Mailing Address 3082 Nelson Dr.

City State Zip Code
Lakewood CO 80215

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

Name of Employer Retired 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
06 / 30 / 2006

Transaction ID: SA11A1.37657

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Ruth Geller

Mailing Address 2333 N. Cleveland Avenue

City State Zip Code
Chicago IL 60614

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

Name of Employer Children's Memorial Hospital Occupation Campaign Chair

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 14 / 2006

Transaction ID: SA11A1.37738

Amount of Each Receipt this Period
500.00

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 17 / 118 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
Keith Goodspeed

Mailing Address 2315 Marak Drive

City State Zip Code
Grafton WI 53024-9762

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

Name of Employer Occupation
Retired from USAF & Diamond Brands Inc 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 6 / 2 2 / 2 0 0 6

Transaction ID: SA11A1.37788

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
John Hedges

Mailing Address 421 W. Melrose 17C

City State Zip Code
Chicago IL 60657

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

Name of Employer Occupation
Sun Belle Inc. Businessman

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

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.37955

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Brad Jaffe

Mailing Address 2 East Oak

City State Zip Code
Chicago IL 60611

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

Name of Employer Occupation
Self-Employed Political Consultant

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

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 2 / 2 0 0 6

Transaction ID: SA11A1.38066

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) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 18 / 118 |
| | <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)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
Douglas Jones

Mailing Address 3 Quarty Circle

City East Hampton State NY Zip Code 11937

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
06 / 20 / 2006

Transaction ID: SA11A1.38110

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Steven Kaiser

Mailing Address 1334 Arbar Ave

City Highland Park State IL Zip Code 60035

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

Name of Employer Kaiser International, LLC Occupation Business Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
06 / 21 / 2006

Transaction ID: SA11A1.38129

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Stanely Kanter

Mailing Address 514 Commerce Parkway

City Verona State WI Zip Code 53593

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

Name of Employer Pure Sweet Honey Farm, Inc. Occupation Business Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
06 / 09 / 2006

Transaction ID: SA11A1.38139

Amount of Each Receipt this Period
500.00

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1250.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 19 / 118 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
Patrick Kennedy

Mailing Address 2229 NW 5th St.

City Gresham State OR Zip Code 97030

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 21 / 2006

Transaction ID: SA11A1.38176

Amount of Each Receipt this Period
 25.00

B. Full Name (Last, First, Middle Initial)
Rachel Kohler

Mailing Address 2614 N. Mildred Ave

City Chicago State IL Zip Code 60614

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

Name of Employer Kohler Company Occupation Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 20 / 2006

Transaction ID: SA11A1.38224

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
J. Jay Kopf

Mailing Address P.O. Box 773765

City Steamboat Springs State CO Zip Code 80477

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

Name of Employer Retired 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
 06 / 23 / 2006

Transaction ID: SA11A1.38227

Amount of Each Receipt this Period
 50.00

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1075.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 20 / 118 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
Robert Kreisman

Mailing Address 55 West Monroe St. #3720

City State Zip Code
Chicago IL 60603

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

Name of Employer Occupation
Kreisman Law Offices Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
06 / 12 / 2006

Transaction ID: SA11A1.38243

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mary Liebman

Mailing Address 410 S. Ridge Road

City State Zip Code
Bull Valley IL 60050-7505

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
06 / 08 / 2006

Transaction ID: SA11A1.38347

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Martha Melmen

Mailing Address 20 Locust Road

City State Zip Code
Wilmette IL 60093

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

Name of Employer Occupation
Lettuce Entertain You Enterprises Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
06 / 14 / 2006

Transaction ID: SA11A1.38527

Amount of Each Receipt this Period
250.00

| | | |
|--|---|---------|
| 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) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 21 / 118 |
| | (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)
Progressive Patriots Fund

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. John J.B. Miller | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 6 |
| Mailing Address 1300 Barbara Ann St | | Transaction ID: SA11A1.38571 |
| City State Zip Code Kerrville TX 78028 | Amount of Each Receipt this Period 250.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Retired | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 700.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. David Mixner | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 |
| Mailing Address 300 E. 40th St Apt 26B | | Transaction ID: SA11A1.38587 |
| City State Zip Code New York NY 10016 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self-Employed | Occupation Activist/Author | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2500.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Randall Notgrass | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 6 |
| Mailing Address 8604 F.M. 969 | | Transaction ID: SA11A1.38666 |
| City State Zip Code Austin TX 78724 | Amount of Each Receipt this Period 75.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Retired | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 225.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 1325.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|---|---|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | PAGE 22 / 118 |
| | (check only one) | <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)
Progressive Patriots Fund

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Bill Olafsen | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6 |
| Mailing Address 860 North Lake Shore Drive Apt 9L | | Transaction ID: SA11A1.38693 |
| City State Zip Code Chicago IL 60611 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Olafsen Design Group, Ltd. | Occupation Owner | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Douglas Patinkin | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6 |
| Mailing Address 1252 W. Wrightwood Avenue | | Transaction ID: SA11A1.39722 |
| City State Zip Code Chicago IL 60614 | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | | In-kind - Event Expense: Decorations |
| Name of Employer Limoges Jewelry | Occupation President | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Hal Patinkin | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 6 |
| Mailing Address 6153 S Speer Rd | | Transaction ID: SA11A1.38744 |
| City State Zip Code Hanover IL 61041 | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Retired | Occupation Retired/Patinkin Red Angus Farm | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 2000.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 23 / 118 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
Jenny Patinkin

Mailing Address 1252 W. Wrightwood Avenue

City State Zip Code
Chicago IL 60607

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

Name of Employer Occupation
Limoges Jewelry President

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 6 / 2 3 / 2 0 0 6

Transaction ID: SA11A1.39726

Amount of Each Receipt this Period
3000.00

In-kind - Event Expense:
Catering

B. Full Name (Last, First, Middle Initial)
Jenny Patinkin

Mailing Address 1252 W. Wrightwood Avenue

City State Zip Code
Chicago IL 60607

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

Name of Employer Occupation
Limoges Jewelry President

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 6 / 2 6 / 2 0 0 6

Transaction ID: SA11A1.38746

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Peter Pedraza

Mailing Address 3329 N. Seminary Ave.

City State Zip Code
Chicago IL 60657

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

Name of Employer Occupation
Equity Office Properties Trust Director, Public Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 1 / 2 0 0 6

Transaction ID: SA11A1.38761

Amount of Each Receipt this Period
1000.00

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 6000.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 24 / 118 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

| | | | |
|---|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. Robert Phillips | | Date of Receipt M M / D D / Y Y Y Y 06 / 14 / 2006 | |
| Mailing Address 911 N Irene Ave. #1 | | Transaction ID: SA11A1.38800 | |
| City Marshfield | State WI | Zip Code 54449 | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Marshfield Clinic | Occupation Physician | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | | |

| | | | |
|---|------------------------------------|--|---|
| Full Name (Last, First, Middle Initial) B. Karen Pieper | | Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006 | |
| Mailing Address 4119 Blaisdell Ave | | Transaction ID: SA11A1.38806 | |
| City Minneapolis | State MN | Zip Code 55409 | Amount of Each Receipt this Period 50.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer All Saints Lutheran Church | Occupation Music Director | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | | |

| | | | |
|---|------------------------------------|--|---|
| Full Name (Last, First, Middle Initial) C. Karen Pieper | | Date of Receipt M M / D D / Y Y Y Y 06 / 28 / 2006 | |
| Mailing Address 4119 Blaisdell Ave | | Transaction ID: SA11A1.38805 | |
| City Minneapolis | State MN | Zip Code 55409 | Amount of Each Receipt this Period 50.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer All Saints Lutheran Church | Occupation Music Director | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 550.00 | | |

| | |
|--|--------|
| 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) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 25 / 118 |
| | (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)
Progressive Patriots Fund

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Alison Pigg | | Date of Receipt MM / DD / YYYY 06 / 15 / 2006 |
| Mailing Address 12410 Robison Blvd | | Transaction ID: SA11A1.38809 |
| City State Zip Code Poway CA 92064 | FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 50.01 |
| Name of Employer Homemaker | Occupation Homemaker | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.02 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Jacques Preis | | Date of Receipt MM / DD / YYYY 06 / 14 / 2006 |
| Mailing Address 1150 W. Wrightwood | | Transaction ID: SA11A1.38851 |
| City State Zip Code Chicago IL 60614 | FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 500.00 |
| Name of Employer Rome Associates | Occupation Tax Lawyer and CPA | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Scott Radis | | Date of Receipt MM / DD / YYYY 06 / 26 / 2006 |
| Mailing Address 2130 West Churchill | | Transaction ID: SA11A1.38877 |
| City State Zip Code Chicago IL 60647 | FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 250.00 |
| Name of Employer Self-Employed | Occupation Real Estate | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) | 800.01 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 26 / 118 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
Trisha Riedy

Mailing Address 583 rue Jean de Gingins

City State Zip Code
Divonne ZZ 01220

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

Name of Employer Occupation
UN Inst for Training&Rese- arch Sr Coord Prog in Peacemaking & Prevent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
06 / 15 / 2006

Transaction ID: SA11A1.39679

Amount of Each Receipt this Period
500.00

US Citizen Living Abroad

B. Full Name (Last, First, Middle Initial)
Sidney Robbins

Mailing Address 4208 Marina Court

City State Zip Code
Cortez FL 34215

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
06 / 14 / 2006

Transaction ID: SA11A1.38953

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Marcia Robinson

Mailing Address 402 Redwood Avenue

City State Zip Code
Corte Madera CA 94925

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 12 / 2006

Transaction ID: SA11A1.38962

Amount of Each Receipt this Period
250.00

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1250.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 27 / 118 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
Stuart Rose

Mailing Address 1712 West Melrose St.

City State Zip Code
Chicago IL 60657

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

Name of Employer Occupation
SR Builders President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
06 / 28 / 2006

Transaction ID: SA11A1.38991

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Richard Russell

Mailing Address 2642 Kendall Avenue

City State Zip Code
Madison WI 53705

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
227.00

Date of Receipt
MM / DD / YYYY
06 / 07 / 2006

Transaction ID: SA11A1.39024

Amount of Each Receipt this Period
127.00

C. Full Name (Last, First, Middle Initial)
Glenn Schnadt

Mailing Address 20215 Coneflower Ln

City State Zip Code
Richland Center WI 53581-8647

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2006

Transaction ID: SA11A1.39093

Amount of Each Receipt this Period
100.00

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 477.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 28 / 118 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
Joseph Schultz

Mailing Address 545 Donna Drive

City Bath State PA Zip Code 18014-8882

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
06 / 08 / 2006

Transaction ID: SA11A1.39109

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Susan Schwartz

Mailing Address 2022 North Clifton St.

City Chicago State IL Zip Code 60614

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

Name of Employer Corboy & Demetrio Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
06 / 26 / 2006

Transaction ID: SA11A1.39124

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Gordon Segal

Mailing Address 34 Woodley Road

City Winnetka State IL Zip Code 60093

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
06 / 09 / 2006

Transaction ID: SA11A1.39139

Amount of Each Receipt this Period
500.00

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1250.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 29 / 118 |
| | (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)
Progressive Patriots Fund

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Jian Chyun Shen | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6 |
| Mailing Address 16 Bayside | | Transaction ID: SA11A1.39160 |
| City State Zip Code Irvine CA 92614 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Techven (USA) LLC | Occupation Owner | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Stephen Shimshak | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 6 |
| Mailing Address 40 E. 83rd St. #9W | | Transaction ID: SA11A1.39166 |
| City State Zip Code New York NY 10028 | Amount of Each Receipt this Period 2500.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Paul, Weiss, Ritzkind, Wharton & Garris | Occupation Lawyer | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2500.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Claire Silberman | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6 |
| Mailing Address 28 Old Fulton St. Apt 1J | | Transaction ID: SA11A1.39172 |
| City State Zip Code Brooklyn NY 11201 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self-Employed | Occupation Consultant | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2000.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 4500.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 30 / 118 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
Stephanie Sinder

Mailing Address 1235 West Melrose St.

City State Zip Code
Chicago IL 60657

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 26 / 2006

Transaction ID: SA11A1.39189

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Yzetta Smith

Mailing Address Route 1
Box 470

City State Zip Code
West Hamlin WV 25571

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

Name of Employer Occupation
Retina Consultants, PLLC Medical Transcriptionist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
MM / DD / YYYY
06 / 07 / 2006

Transaction ID: SA11A1.39225

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Jeffrey Soref

Mailing Address 7 Gramercy Park West

City State Zip Code
New York NY 10003

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

Name of Employer Occupation
Self-Employed Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
06 / 27 / 2006

Transaction ID: SA11A1.39234

Amount of Each Receipt this Period
2500.00

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 2775.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 31 / 118 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
Isobel Sturgeon

Mailing Address P.O. Box 460125

City State Zip Code
Fort Lauderdale FL 33346-0125

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

Name of Employer Flying Fish Transforms, LLC. Occupation Secretary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1235.00

Date of Receipt
MM / DD / YYYY
06 / 07 / 2006

Transaction ID: SA11A1.39343

Amount of Each Receipt this Period
235.00

B. Full Name (Last, First, Middle Initial)
Nancy Tally

Mailing Address 10338 Pflumm Rd. Apt. 1018

City State Zip Code
Lenexa KS 66215

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

Name of Employer Meadowbrook Rehab. Occupation Nurse

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
06 / 21 / 2006

Transaction ID: SA11A1.39373

Amount of Each Receipt this Period
100.00

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

Mailing Address 4895 Deerpath Ln NE

City State Zip Code
Bainbridge Island WA 98110

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
06 / 15 / 2006

Transaction ID: SA11A1.39477

Amount of Each Receipt this Period
1000.00

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1335.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 32 / 118 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
Julie Wilgoren Coffman

Mailing Address 3819 N. Oakley Ave

City State Zip Code
Chicago IL 60618

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

Name of Employer Occupation
Bain & Co. Managment Consultant

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

Date of Receipt
M M / D D / Y Y Y Y
06 / 26 / 2006

Transaction ID: SA11A1.39556

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Barbara Wilson

Mailing Address 151 Greenwood Way

City State Zip Code
Mill Valley CA 94941

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 28 / 2006

Transaction ID: SA11A1.39575

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Anthony Winter

Mailing Address 3330 Taurus Drive

City State Zip Code
Racine WI 53406-1328

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

Name of Employer Occupation
IT Contractor J. Reckner Associates

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

Date of Receipt
M M / D D / Y Y Y Y
06 / 07 / 2006

Transaction ID: SA11A1.39593

Amount of Each Receipt this Period
150.00

| | | |
|--|---|---------|
| 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) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 33 / 118 |
| | (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)
Progressive Patriots Fund

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

Mailing Address 2206 Chadbourne Avenue

City State Zip Code
Madison WI 53762

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
06 / 27 / 2006

Transaction ID: SA11A1.39667

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Douglas Zweizig

Mailing Address 6037 N Finn Rd

City State Zip Code
Evansville WI 53536

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

Name of Employer Occupation
University of Wisconsin-Madison Retired Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
06 / 27 / 2006

Transaction ID: SA11A1.39675

Amount of Each Receipt this Period
250.00

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional) | 750.00 |
| TOTAL This Period (last page this line number only) | 42907.89 |

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

| | | | | |
|--|------------------------------|------------------------------|-----------------------------|--|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | | PAGE 34 / 118 | |
| | (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)
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial)
Park Bank

Mailing Address 1801 Greenway Cross

City State Zip Code
Madison WI 53708

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1006.51

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 3 | 0 | / | 2 | 0 | 0 | 6 |

Transaction ID: SA17.39734

Amount of Each Receipt this Period
670.57

Interest Income

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 670.57 |
| TOTAL This Period (last page this line number only) | ▶ | 670.57 |

**SCHEDULE 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)
Progressive Patriots Fund

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Blue State Digital, LLC | | Transaction ID: SB21B.36795 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 6 |
| Mailing Address 1341 Connecticut Ave, NW 5th Floor | | Amount of Each Disbursement this Period 798.75 |
| City Washington State DC Zip Code 20036 | Purpose of Disbursement See Memo Entries 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) ▼ | Category/Type |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Blue State Digital, LLC | | Transaction ID: SB21B.36795.0 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 6 |
| Mailing Address 1341 Connecticut Ave, NW 5th Floor | | Amount of Each Disbursement this Period 750.00 |
| City Washington State DC Zip Code 20036 | Purpose of Disbursement Website Management Consulting 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) ▼ | Category/Type [MEMO ITEM] |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Blue State Digital, LLC | | Transaction ID: SB21B.36795.1 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6 |
| Mailing Address 1341 Connecticut Ave, NW 5th Floor | | Amount of Each Disbursement this Period 48.75 |
| City Washington State DC Zip Code 20036 | Purpose of Disbursement Banking Fee 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) ▼ | Category/Type [MEMO ITEM] |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 798.75 |
| 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 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)
Progressive Patriots Fund

| | | |
|---|--|---|
| A. Citibank Full Name (Last, First, Middle Initial) Mailing Address 100 Citibank Drive City San Antonio State TX Zip Code 78245 Purpose of Disbursement Credit Card Payment: See Memo Entries 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.36811 Date of Disbursement: M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 6 Amount of Each Disbursement this Period: 1158.20 Category/Type |
|---|--|---|

| | | |
|---|--|--|
| B. OfficeMax Full Name (Last, First, Middle Initial) Mailing Address 7431 West Towne Way City Madison State WI Zip Code 53719 Purpose of Disbursement Office 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.36811.0 Date of Disbursement: M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6 Amount of Each Disbursement this Period: 8.43 Category/Type [MEMO ITEM] |
|---|--|--|

| | | |
|---|--|---|
| C. OfficeMax Full Name (Last, First, Middle Initial) Mailing Address 7431 West Towne Way City Madison State WI Zip Code 53719 Purpose of Disbursement Office 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.36811.1 Date of Disbursement: M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 6 Amount of Each Disbursement this Period: 41.14 Category/Type [MEMO ITEM] |
|---|--|---|

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1158.20 |
| TOTAL 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)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Best Western | | Transaction ID: SB21B.36811.3 Date of Disbursement MM / DD / YYYY 06 / 04 / 2006 |
| Mailing Address 6201 N. 24th Parkway | | Amount of Each Disbursement this Period 691.16 [MEMO ITEM] |
| City Phoenix State AZ Zip Code 85016 | | |
| Purpose of Disbursement Lodging 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) ▼ | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) B. Enterprise Rent-A-Car | | Transaction ID: SB21B.36811.6 Date of Disbursement MM / DD / YYYY 06 / 06 / 2006 | |
| Mailing Address 600 Corporate Park Drive | | Amount of Each Disbursement this Period 201.07 [MEMO ITEM] | |
| City St. Louis State MO Zip Code 63105 | | | |
| Purpose of Disbursement Rental Car 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) ▼ |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) C. Cole Leystra | | Transaction ID: SB21B.39763 Date of Disbursement MM / DD / YYYY 06 / 01 / 2006 | |
| Mailing Address 2898 Mickelson Pkwy, #204 | | Amount of Each Disbursement this Period 779.69 [MEMO ITEM] | |
| City Fitchburg State WI Zip Code 53711 | | | |
| Purpose of Disbursement Payroll 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) ▶ | 779.69 |
| 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)

PAGE 38 / 118

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Cole Leystra | | Transaction ID: SB21B.39826 Date of Disbursement MM / DD / YYYY 06 / 15 / 2006 |
| Mailing Address 2898 Mickelson Pkwy, #204 | | Amount of Each Disbursement this Period 779.71 |
| City Fitchburg State WI Zip Code 53711 | Purpose of Disbursement Payroll 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Cole Leystra | | Transaction ID: SB21B.36807 Date of Disbursement MM / DD / YYYY 06 / 16 / 2006 |
| Mailing Address 2898 Mickelson Pkwy, #204 | | Amount of Each Disbursement this Period 51.47 |
| City Fitchburg State WI Zip Code 53711 | Purpose of Disbursement Reimbursement: See Memo Text 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Cole Leystra | | Transaction ID: SB21B.39875 Date of Disbursement MM / DD / YYYY 06 / 29 / 2006 |
| Mailing Address 2898 Mickelson Pkwy, #204 | | Amount of Each Disbursement this Period 796.97 |
| City Fitchburg State WI Zip Code 53711 | Purpose of Disbursement Payroll 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) ▶ | 1628.15 |
| 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)

PAGE 39 / 118

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Comcast | | Transaction ID: SB21B.39780 Date of Disbursement MM / DD / YYYY 06 / 01 / 2006 |
| Mailing Address PO Box 3005 | | Amount of Each Disbursement this Period 49.95 |
| City Southeastern State PA Zip Code 19398-3005 | Purpose of Disbursement Internet Service 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Comcast | | Transaction ID: SB21B.39815 Date of Disbursement MM / DD / YYYY 06 / 14 / 2006 |
| Mailing Address PO Box 3005 | | Amount of Each Disbursement this Period 26.36 |
| City Southeastern State PA Zip Code 19398-3005 | Purpose of Disbursement Internet Service 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Comcast | | Transaction ID: SB21B.36810 Date of Disbursement MM / DD / YYYY 06 / 16 / 2006 |
| Mailing Address PO Box 3005 | | Amount of Each Disbursement this Period 17.73 |
| City Southeastern State PA Zip Code 19398-3005 | Purpose of Disbursement Internet Service 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) ▶ | 94.04 |
| 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)

PAGE 40 / 118

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. David Kreisman | | Transaction ID: SB21B.39764 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6 |
| Mailing Address 502 N Henry St | | Amount of Each Disbursement this Period 716.11 |
| City Madison State WI Zip Code 53703 | | |
| Purpose of Disbursement Payroll 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. David Kreisman | | Transaction ID: SB21B.39831 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6 |
| Mailing Address 502 N Henry St | | Amount of Each Disbursement this Period 705.37 |
| City Madison State WI Zip Code 53703 | | |
| Purpose of Disbursement Payroll 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. David Kreisman | | Transaction ID: SB21B.39896 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6 |
| Mailing Address 502 N Henry St | | Amount of Each Disbursement this Period 47.60 |
| City Madison State WI Zip Code 53703 | | |
| Purpose of Disbursement Reimbursement: See Memo Entry 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) ▶ | 1469.08 |
| 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 41 / 118

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Kelley's Market | | Transaction ID: SB21B.39896.0 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6 |
| Mailing Address 633 Junction Rd | | Amount of Each Disbursement this Period 47.60 [MEMO ITEM] |
| City Madison State WI Zip Code 53717 | | |
| Purpose of Disbursement Travel Expense: Gas | 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. David Kreisman | | Transaction ID: SB21B.39876 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6 |
| Mailing Address 502 N Henry St | | Amount of Each Disbursement this Period 716.11 |
| City Madison State WI Zip Code 53703 | | |
| Purpose of Disbursement Payroll | 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. DemStore.com | | Transaction ID: SB21B.39793 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 6 |
| Mailing Address 5125 MacArthur Blvd, NW, Suite 14 | | Amount of Each Disbursement this Period 282.80 |
| City Washington State DC Zip Code 20016 | | |
| Purpose of Disbursement Transaction Processing Fee | 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) ▼ | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 998.91 |
| 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)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Department of Employment Services | | Transaction ID: SB21B.39761 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6 |
| Mailing Address 500 C St. NW Room 501 | | Amount of Each Disbursement this Period 32.83 |
| City Washington State DC Zip Code 20001 | Purpose of Disbursement Unemployment Tax Withheld | |
| 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Department of Employment Services | | Transaction ID: SB21B.39762 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6 |
| Mailing Address 500 C St. NW Room 501 | | Amount of Each Disbursement this Period 2.43 |
| City Washington State DC Zip Code 20001 | Purpose of Disbursement Administrative Funding Assessment Tax | |
| 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Department of Employment Services | | Transaction ID: SB21B.39820 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6 |
| Mailing Address 500 C St. NW Room 501 | | Amount of Each Disbursement this Period 2.43 |
| City Washington State DC Zip Code 20001 | Purpose of Disbursement Administrative Funding Assessment Tax | |
| 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) ▼ | |

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|--|-------|
| 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)

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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)
Progressive Patriots Fund

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Department of Employment Services | | Transaction ID: SB21B.39822 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6 |
| Mailing Address 500 C St. NW Room 501 | | Amount of Each Disbursement this Period 32.82 |
| City Washington State DC Zip Code 20001 | Category/ Type | |
| Purpose of Disbursement Unemployment Tax Withheld | | |
| 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Department of Employment Services | | Transaction ID: SB21B.39872 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6 |
| Mailing Address 500 C St. NW Room 501 | | Amount of Each Disbursement this Period 33.23 |
| City Washington State DC Zip Code 20001 | Category/ Type | |
| Purpose of Disbursement Unemployment Tax Withheld | | |
| 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Department of Employment Services | | Transaction ID: SB21B.39873 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6 |
| Mailing Address 500 C St. NW Room 501 | | Amount of Each Disbursement this Period 2.47 |
| City Washington State DC Zip Code 20001 | Category/ Type | |
| Purpose of Disbursement Administrative Funding Assessment Tax | | |
| 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) ▼ | |

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|--|-------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 68.52 |
| 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)
Progressive Patriots Fund

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Department of Workforce Development | | Transaction ID: SB21B.39759 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6 |
| Mailing Address 201 E. Washington Avenue | | Amount of Each Disbursement this Period 158.63 |
| City Madison State WI Zip Code 53702 | Purpose of Disbursement Unemployment Tax Withheld | |
| 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Department of Workforce Development | | Transaction ID: SB21B.39824 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6 |
| Mailing Address 201 E. Washington Avenue | | Amount of Each Disbursement this Period 116.25 |
| City Madison State WI Zip Code 53702 | Purpose of Disbursement Unemployment Tax Withheld | |
| 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Department of Workforce Development | | Transaction ID: SB21B.39871 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6 |
| Mailing Address 201 E. Washington Avenue | | Amount of Each Disbursement this Period 98.44 |
| City Madison State WI Zip Code 53702 | Purpose of Disbursement Unemployment Tax Withheld | |
| 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) ▼ | |

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|--|--------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 373.32 |
| 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)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Eichenbaum and Associates | | Transaction ID: SB21B.39794 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 6 |
| Mailing Address 219 North Milwaukee St | | Amount of Each Disbursement this Period 14837.44 |
| City Milwaukee State WI Zip Code 53202 | Category/ Type | |
| Purpose of Disbursement Merchandise Production | | |
| 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Eichenbaum and Associates | | Transaction ID: SB21B.39816 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6 |
| Mailing Address 219 North Milwaukee St | | Amount of Each Disbursement this Period 15824.94 |
| City Milwaukee State WI Zip Code 53202 | Category/ Type | |
| Purpose of Disbursement Internet Video Production | | |
| 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. FedEx Kinkos | | Transaction ID: SB21B.39786 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 6 |
| Mailing Address 7805 Mineral Point Rd | | Amount of Each Disbursement this Period 113.94 |
| City Madison State WI Zip Code 53717 | Category/ Type | |
| Purpose of Disbursement Photocopying Expense | | |
| 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) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 30776.32 |
| 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)
Progressive Patriots Fund

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. FedEx Kinkos | | Transaction ID: SB21B.39798 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 6 |
| Mailing Address 7805 Mineral Point Rd | | Amount of Each Disbursement this Period 67.48 |
| City Madison State WI Zip Code 53717 | Purpose of Disbursement Photocopying Expense 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) ▼ | Category/Type |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. FedEx Kinkos | | Transaction ID: SB21B.39804 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 |
| Mailing Address 7805 Mineral Point Rd | | Amount of Each Disbursement this Period 15.86 |
| City Madison State WI Zip Code 53717 | Purpose of Disbursement Photocopying Expense 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) ▼ | Category/Type |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. FedEx Kinkos | | Transaction ID: SB21B.39808 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6 |
| Mailing Address 7805 Mineral Point Rd | | Amount of Each Disbursement this Period 378.22 |
| City Madison State WI Zip Code 53717 | Purpose of Disbursement Photocopying Expense 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) ▼ | Category/Type |

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|--|--------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 461.56 |
| 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)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | | |
|---|--|--|---|
| Full Name (Last, First, Middle Initial) A. FedEx Kinkos | | Transaction ID: SB21B.39845 | |
| Mailing Address 7805 Mineral Point Rd | | Date of Disbursement MM / DD / YYYY 06 / 19 / 2006 | |
| City Madison | State WI | Zip Code 53717 | Amount of Each Disbursement this Period 232.94 |
| Purpose of Disbursement Photocopying Expense | | 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: | | | |

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|---|--|--|--|
| Full Name (Last, First, Middle Initial) B. FedEx Kinkos | | Transaction ID: SB21B.39849 | |
| Mailing Address 7805 Mineral Point Rd | | Date of Disbursement MM / DD / YYYY 06 / 20 / 2006 | |
| City Madison | State WI | Zip Code 53717 | Amount of Each Disbursement this Period 21.75 |
| Purpose of Disbursement Photocopying Expense | | 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: | | | |

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|---|--|--|--|
| Full Name (Last, First, Middle Initial) C. Full Compass Systems, LTD | | Transaction ID: SB21B.39787 | |
| Mailing Address 8001 Terrace Avenue | | Date of Disbursement MM / DD / YYYY 06 / 06 / 2006 | |
| City Middleton | State WI | Zip Code 53562 | Amount of Each Disbursement this Period 62.53 |
| Purpose of Disbursement Camera Equipment | | 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: | | | |

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|--|---------------|
| SUBTOTAL of Disbursements This Page (optional) | 317.22 |
| 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 48 / 118

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. George Aldrich | | Transaction ID: SB21B.39769 Date of Disbursement MM / DD / YYYY 06 / 01 / 2006 |
| Mailing Address 538 N 51st St | | Amount of Each Disbursement this Period 1336.03 |
| City Milwaukee | State WI Zip Code 53208 | |
| Purpose of Disbursement Payroll | | |
| 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: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. George Aldrich | | Transaction ID: SB21B.36621 Date of Disbursement MM / DD / YYYY 06 / 07 / 2006 |
| Mailing Address 538 N 51st St | | Amount of Each Disbursement this Period 340.58 |
| City Milwaukee | State WI Zip Code 53208 | |
| Purpose of Disbursement Reimbursement: See Memo Entries and Text | | |
| 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: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. TDS Metrocom | | Transaction ID: SB21B.36621.0 Date of Disbursement MM / DD / YYYY 05 / 05 / 2006 |
| Mailing Address PO Box 620070 | | Amount of Each Disbursement this Period 90.00 |
| City Middleton | State WI Zip Code 53562 | |
| Purpose of Disbursement Internet Service | | |
| 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: | | |

[MEMO ITEM]

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1676.61 |
| 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)
Progressive Patriots Fund

| | | |
|--|-------------|---|
| Full Name (Last, First, Middle Initial) A. Verizon Wireless | | Transaction ID: SB21B.36621.1 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6 |
| Mailing Address PO Box 17464 | | Amount of Each Disbursement this Period 150.00 |
| City Baltimore State MD Zip Code 21297 | [MEMO ITEM] | |
| Purpose of Disbursement Cell Phone Expense Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | |

| | | |
|--|-------------|---|
| Full Name (Last, First, Middle Initial) B. Radisson Hotels | | Transaction ID: SB21B.36621.2 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 6 |
| Mailing Address 11340 Blondo Street | | Amount of Each Disbursement this Period 10.83 |
| City Omaha State NE Zip Code 68164 | [MEMO ITEM] | |
| Purpose of Disbursement Internet Access Charges Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | |

| | | |
|--|-------------|---|
| Full Name (Last, First, Middle Initial) C. George Aldrich | | Transaction ID: SB21B.39833 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6 |
| Mailing Address 538 N 51st St | | Amount of Each Disbursement this Period 1336.01 |
| City Milwaukee State WI Zip Code 53208 | [MEMO ITEM] | |
| Purpose of Disbursement Payroll Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1336.01 |
| 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 50 / 118

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. George Aldrich | | Transaction ID: SB21B.39877 Date of Disbursement MM / DD / YYYY 06 / 29 / 2006 |
| Mailing Address 538 N 51st St | | Amount of Each Disbursement this Period 1336.02 |
| City Milwaukee | State WI Zip Code 53208 | |
| Purpose of Disbursement Payroll | | |
| 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: | | |

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|--|--|--|
| Full Name (Last, First, Middle Initial) B. Gordon Flesch Co., Inc | | Transaction ID: SB21B.39790 Date of Disbursement MM / DD / YYYY 06 / 06 / 2006 |
| Mailing Address PO Box 992 | | Amount of Each Disbursement this Period 73.48 |
| City Madison | State WI Zip Code 53701 | |
| Purpose of Disbursement Monthly Rental Fee: Copier | | |
| 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: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Greenway Office Center LLC | | Transaction ID: SB21B.39777 Date of Disbursement MM / DD / YYYY 06 / 01 / 2006 |
| Mailing Address 8401 Greenway Blvd | | Amount of Each Disbursement this Period 560.73 |
| City Middleton | State WI Zip Code 53562 | |
| Purpose of Disbursement Office Rent | | |
| 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: | | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 1970.23 |
| 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

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)
Progressive Patriots Fund

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Heritage Pride, Inc | | Transaction ID: SB21B.39851 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 6 |
| Mailing Address 154 Christopher St #1D | | Amount of Each Disbursement this Period 175.00 |
| City New York State NY Zip Code 10014 | Purpose of Disbursement Booth Rental 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) ▼ | |

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|--|--|--|
| Full Name (Last, First, Middle Initial) B. John Brian McCarthy | | Transaction ID: SB21B.39773 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6 |
| Mailing Address 6120 Century Ave Apt 203 | | Amount of Each Disbursement this Period 732.08 |
| City Middleton State WI Zip Code 53562 | Purpose of Disbursement Payroll 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) ▼ | |

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|--|--|--|
| Full Name (Last, First, Middle Initial) C. John Brian McCarthy | | Transaction ID: SB21B.36596 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6 |
| Mailing Address 6120 Century Ave Apt 203 | | Amount of Each Disbursement this Period 115.39 |
| City Middleton State WI Zip Code 53562 | Purpose of Disbursement Reimbursement: See Memo Entries and Text 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) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 1022.47 |
| 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)
Progressive Patriots Fund

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Kelley's Market | | Transaction ID: SB21B.36596.1 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 6 |
| Mailing Address 633 Junction Rd | | Amount of Each Disbursement this Period 48.36 [MEMO ITEM] |
| City Madison State WI Zip Code 53717 | | |
| Purpose of Disbursement Travel Expense: Gas | 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) ▼ | |

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|--|--|---|
| Full Name (Last, First, Middle Initial) B. Riviera Hotel | | Transaction ID: SB21B.36596.2 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 6 |
| Mailing Address 2901 Las Vegas Blvd S | | Amount of Each Disbursement this Period 8.00 [MEMO ITEM] |
| City Las Vegas State NV Zip Code 89109-1931 | | |
| Purpose of Disbursement Travel Expense: Food and Beverage | 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. John Brian McCarthy | | Transaction ID: SB21B.39830 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6 |
| Mailing Address 6120 Century Ave Apt 203 | | Amount of Each Disbursement this Period 732.07 [MEMO ITEM] |
| City Middleton State WI Zip Code 53562 | | |
| Purpose of Disbursement Payroll | 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) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 732.07 |
| 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)
Progressive Patriots Fund

| | | |
|---|---|--|
| <p>A. Full Name (Last, First, Middle Initial) John Brian McCarthy</p> | | <p>Transaction ID: SB21B.39878 Date of Disbursement</p> |
| <p>Mailing Address 6120 Century Ave Apt 203</p> | | <p><input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2006"/></p> |
| <p>City Middleton State WI Zip Code 53562</p> | <p>Amount of Each Disbursement this Period</p> | |
| <p>Purpose of Disbursement Payroll</p> | <p><input type="text" value="742.84"/></p> | |
| <p>Candidate Name</p> | <p>Category/Type</p> | |
| <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> | <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | |
| <p>State: District:</p> | | |

| | | |
|---|---|--|
| <p>B. Full Name (Last, First, Middle Initial) Juniper Bank</p> | | <p>Transaction ID: SB21B.36623 Date of Disbursement</p> |
| <p>Mailing Address PO Box 13337</p> | | <p><input type="text" value="06"/> / <input type="text" value="07"/> / <input type="text" value="2006"/></p> |
| <p>City Philadelphia State PA Zip Code 19101-3337</p> | <p>Amount of Each Disbursement this Period</p> | |
| <p>Purpose of Disbursement Credit Card Payment: See Memo Entries</p> | <p><input type="text" value="14190.74"/></p> | |
| <p>Candidate Name</p> | <p>Category/Type</p> | |
| <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> | <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | |
| <p>State: District:</p> | | |

| | | |
|---|---|--|
| <p>C. Full Name (Last, First, Middle Initial) Magnolia Hotel</p> | | <p>Transaction ID: SB21B.36623.3 Date of Disbursement</p> |
| <p>Mailing Address 1100 Texas Avenue</p> | | <p><input type="text" value="04"/> / <input type="text" value="18"/> / <input type="text" value="2006"/></p> |
| <p>City Houston State TX Zip Code 77002</p> | <p>Amount of Each Disbursement this Period</p> | |
| <p>Purpose of Disbursement Travel Expense: Food and Beverage</p> | <p><input type="text" value="104.00"/></p> | |
| <p>Candidate Name</p> | <p>Category/Type</p> | |
| <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> | <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | |
| <p>State: District:</p> | <p>[MEMO ITEM]</p> | |

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|---|--|
| <p>SUBTOTAL of Disbursements This Page (optional)</p> | <p><input type="text" value="14933.58"/></p> |
| <p>TOTAL 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)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|-----------|--|
| Full Name (Last, First, Middle Initial) A. Magnolia Hotel | | Transaction ID: SB21B.36623.4 |
| Mailing Address 1100 Texas Avenue | | Date of Disbursement MM / DD / YYYY 04 / 18 / 2006 |
| City Houston | State TX | Zip Code 77002 |
| Purpose of Disbursement Reservation Fee | | Amount of Each Disbursement this Period 5.00 |
| Candidate Name | | |
| 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: | |

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|--|-----------|--|
| Full Name (Last, First, Middle Initial) B. Magnolia Hotel | | Transaction ID: SB21B.36623.5 |
| Mailing Address 1100 Texas Avenue | | Date of Disbursement MM / DD / YYYY 04 / 18 / 2006 |
| City Houston | State TX | Zip Code 77002 |
| Purpose of Disbursement Reservation Fee | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name | | |
| 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: | |

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|--|-----------|--|
| Full Name (Last, First, Middle Initial) C. Radisson Hotels | | Transaction ID: SB21B.36623.9 |
| Mailing Address 11340 Blondo Street | | Date of Disbursement MM / DD / YYYY 04 / 18 / 2006 |
| City Omaha | State NE | Zip Code 68164 |
| Purpose of Disbursement Travel Expense: Food and Beverage | | Amount of Each Disbursement this Period 59.42 |
| Candidate Name | | |
| 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: | |

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| 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)
Progressive Patriots Fund

| | | |
|--|-------------|--|
| Full Name (Last, First, Middle Initial) A. Wilshire Restaurant | | Transaction ID: SB21B.36623.13 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 6 |
| Mailing Address 2454 Wilshire Blvd. | | Amount of Each Disbursement this Period 218.94 |
| City Santa Monica State CA Zip Code 90403 | [MEMO ITEM] | |
| Purpose of Disbursement Travel Expense: Food and Beverage | | 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: | | |

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|--|-------------|--|
| Full Name (Last, First, Middle Initial) B. Hotel Casa del Mar-Oceanfront Restaurant | | Transaction ID: SB21B.36623.14 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 6 |
| Mailing Address 1910 Ocean Way | | Amount of Each Disbursement this Period 219.75 |
| City Santa Monica State CA Zip Code 90405 | [MEMO ITEM] | |
| Purpose of Disbursement Travel Expense: Food and Beverage | | 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: | | |

| | | |
|--|-------------|--|
| Full Name (Last, First, Middle Initial) C. Hotel Oceana | | Transaction ID: SB21B.36623.18 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 6 |
| Mailing Address 849 Ocean Ave | | Amount of Each Disbursement this Period 99.31 |
| City Santa Monica State CA Zip Code 90403 | [MEMO ITEM] | |
| Purpose of Disbursement Travel Expense: Food and Beverage | | 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: | | |

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|--|------|
| 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 56 / 118

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|-------------|---|
| Full Name (Last, First, Middle Initial) A. Hotel Oceana | | Transaction ID: SB21B.36623.19 Date of Disbursement MM / DD / YYYY 04 / 23 / 2006 |
| Mailing Address 849 Ocean Ave | | Amount of Each Disbursement this Period 59.53 |
| City Santa Monica State CA Zip Code 90403 | [MEMO ITEM] | |
| Purpose of Disbursement Travel Expense: Food and Beverage | | 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: | | |

| | | |
|--|-------------|---|
| Full Name (Last, First, Middle Initial) B. Metropolitan Washington Airports Authority | | Transaction ID: SB21B.36623.20 Date of Disbursement MM / DD / YYYY 04 / 23 / 2006 |
| Mailing Address One Aviation Circle | | Amount of Each Disbursement this Period 45.00 |
| City Washington State DC Zip Code 20001 | [MEMO ITEM] | |
| Purpose of Disbursement Parking | | 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: | | |

| | | |
|--|-------------|---|
| Full Name (Last, First, Middle Initial) C. Travelocity | | Transaction ID: SB21B.36623.21 Date of Disbursement MM / DD / YYYY 04 / 24 / 2006 |
| Mailing Address 3150 Sabre Drive | | Amount of Each Disbursement this Period 591.40 |
| City Southlake State TX Zip Code 76092 | [MEMO ITEM] | |
| Purpose of Disbursement Travel Expense: Lodging | | 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: | | |

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| 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)
Progressive Patriots Fund

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Carey Limousine | | Transaction ID: SB21B.36623.23 Date of Disbursement MM / DD / YYYY 04 / 26 / 2006 |
| Mailing Address 6023 Bristol Pkwy | | Amount of Each Disbursement this Period 491.98 |
| City Culver City State CA Zip Code 90230 | | |
| Purpose of Disbursement Car Service | | [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) ▼ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. American Airlines | | Transaction ID: SB21B.36623.24 Date of Disbursement MM / DD / YYYY 04 / 27 / 2006 |
| Mailing Address 4255 Amon Carter Blvd. MD 2400 | | Amount of Each Disbursement this Period 580.30 |
| City Fort Worth State TX Zip Code 76155 | | |
| Purpose of Disbursement Airline Tickets | | [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) ▼ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Delta | | Transaction ID: SB21B.36623.25 Date of Disbursement MM / DD / YYYY 04 / 28 / 2006 |
| Mailing Address Post Office Box 20706 | | Amount of Each Disbursement this Period 309.30 |
| City Atlanta State GA Zip Code 30320 | | |
| Purpose of Disbursement Airline Tickets | | [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) ▼ | |

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|--|------|
| 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 58 / 118

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|-------------|---|
| Full Name (Last, First, Middle Initial) A. Delta | | Transaction ID: SB21B.36623.26 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6 |
| Mailing Address Post Office Box 20706 | | Amount of Each Disbursement this Period 10.00 |
| City Atlanta State GA Zip Code 30320 | [MEMO ITEM] | |
| Purpose of Disbursement Reservation Fees | | 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) ▼ |

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|--|-------------|---|
| Full Name (Last, First, Middle Initial) B. Delta | | Transaction ID: SB21B.36623.27 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6 |
| Mailing Address Post Office Box 20706 | | Amount of Each Disbursement this Period 10.00 |
| City Atlanta State GA Zip Code 30320 | [MEMO ITEM] | |
| Purpose of Disbursement Reservation Fees | | 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) ▼ |

| | | |
|--|-------------|---|
| Full Name (Last, First, Middle Initial) C. Delta | | Transaction ID: SB21B.36623.28 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6 |
| Mailing Address Post Office Box 20706 | | Amount of Each Disbursement this Period 309.30 |
| City Atlanta State GA Zip Code 30320 | [MEMO ITEM] | |
| Purpose of Disbursement Airline Tickets | | 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) ▼ |

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|--|------|
| 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 59 / 118

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|-------------|--|
| Full Name (Last, First, Middle Initial) A. Delta | | Transaction ID: SB21B.36623.29 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6 |
| Mailing Address Post Office Box 20706 | | Amount of Each Disbursement this Period 309.30 |
| City Atlanta State GA Zip Code 30320 | [MEMO ITEM] | |
| Purpose of Disbursement Airline Tickets | | 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) ▼ |

| | | |
|--|-------------|--|
| Full Name (Last, First, Middle Initial) B. Delta | | Transaction ID: SB21B.36623.30 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6 |
| Mailing Address Post Office Box 20706 | | Amount of Each Disbursement this Period 10.00 |
| City Atlanta State GA Zip Code 30320 | [MEMO ITEM] | |
| Purpose of Disbursement Reservation Fees | | 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) ▼ |

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|--|-------------|--|
| Full Name (Last, First, Middle Initial) C. United Airlines | | Transaction ID: SB21B.36623.31 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6 |
| Mailing Address P.O. Box 66100 | | Amount of Each Disbursement this Period 10.00 |
| City Chicago State IL Zip Code 60666 | [MEMO ITEM] | |
| Purpose of Disbursement Reservation Fees | | 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) ▼ |

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| 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)
Progressive Patriots Fund

| | | |
|--|-------------|---|
| Full Name (Last, First, Middle Initial) A. United Airlines | | Transaction ID: SB21B.36623.32 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6 |
| Mailing Address P.O. Box 66100 | | Amount of Each Disbursement this Period 634.60 |
| City Chicago State IL Zip Code 60666 | [MEMO ITEM] | |
| Purpose of Disbursement Airline Tickets | | 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: | | |

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|--|-------------|---|
| Full Name (Last, First, Middle Initial) B. Midwest Express | | Transaction ID: SB21B.36623.34 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6 |
| Mailing Address 6744 South Howell Avenue | | Amount of Each Disbursement this Period 604.80 |
| City Oak Creek State WI Zip Code 53154 | [MEMO ITEM] | |
| Purpose of Disbursement Airline Tickets | | 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: | | |

| | | |
|--|-------------|---|
| Full Name (Last, First, Middle Initial) C. Alaska Airlines | | Transaction ID: SB21B.36623.35 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6 |
| Mailing Address P.O. Box 68900 | | Amount of Each Disbursement this Period 688.60 |
| City Seattle State WA Zip Code 98168 | [MEMO ITEM] | |
| Purpose of Disbursement Airline Tickets | | 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: | | |

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| 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)
Progressive Patriots Fund

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Alaska Airlines | | Transaction ID: SB21B.36623.36 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6 |
| Mailing Address P.O. Box 68900 | | Amount of Each Disbursement this Period 688.60 |
| City Seattle State WA Zip Code 98168 | [MEMO ITEM] | |
| Purpose of Disbursement Airline Tickets | | 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) ▼ | |

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|--|--|--|
| Full Name (Last, First, Middle Initial) B. Midwest Express | | Transaction ID: SB21B.36623.37 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6 |
| Mailing Address 6744 South Howell Avenue | | Amount of Each Disbursement this Period 499.10 |
| City Oak Creek State WI Zip Code 53154 | [MEMO ITEM] | |
| Purpose of Disbursement Airline Tickets | | 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) ▼ | |

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|--|--|--|
| Full Name (Last, First, Middle Initial) C. Midwest Express | | Transaction ID: SB21B.36623.38 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6 |
| Mailing Address 6744 South Howell Avenue | | Amount of Each Disbursement this Period 499.10 |
| City Oak Creek State WI Zip Code 53154 | [MEMO ITEM] | |
| Purpose of Disbursement Airline Tickets | | 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) ▼ | |

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| 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)
Progressive Patriots Fund

| | | |
|--|-------------|--|
| Full Name (Last, First, Middle Initial) A. Best Buy | | Transaction ID: SB21B.36623.40 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6 |
| Mailing Address P.O. Box 9312 | | Amount of Each Disbursement this Period 56.44 |
| City Minneapolis State MN Zip Code 55440-9312 | [MEMO ITEM] | |
| Purpose of Disbursement Office Supplies Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | |

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|--|-------------|--|
| Full Name (Last, First, Middle Initial) B. United Airlines | | Transaction ID: SB21B.36623.42 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6 |
| Mailing Address P.O. Box 66100 | | Amount of Each Disbursement this Period 140.30 |
| City Chicago State IL Zip Code 60666 | [MEMO ITEM] | |
| Purpose of Disbursement Airline Tickets Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | |

| | | |
|--|-------------|--|
| Full Name (Last, First, Middle Initial) C. Delta | | Transaction ID: SB21B.36623.44 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6 |
| Mailing Address Post Office Box 20706 | | Amount of Each Disbursement this Period 378.79 |
| City Atlanta State GA Zip Code 30320 | [MEMO ITEM] | |
| Purpose of Disbursement Airline Tickets Candidate Name | | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | |

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| 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)
Progressive Patriots Fund

| | | |
|--|-------------|--|
| Full Name (Last, First, Middle Initial) A. US Airways | | Transaction ID: SB21B.36623.49 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6 |
| Mailing Address 2345 Crystal Drive | | Amount of Each Disbursement this Period 589.80 |
| City Arlington State VA Zip Code 22227 | [MEMO ITEM] | |
| Purpose of Disbursement Airline Tickets | | 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) ▼ |

| | | |
|--|-------------|--|
| Full Name (Last, First, Middle Initial) B. US Airways | | Transaction ID: SB21B.36623.50 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6 |
| Mailing Address 2345 Crystal Drive | | Amount of Each Disbursement this Period 589.80 |
| City Arlington State VA Zip Code 22227 | [MEMO ITEM] | |
| Purpose of Disbursement Airline Tickets | | 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) ▼ |

| | | |
|--|-------------|--|
| Full Name (Last, First, Middle Initial) C. United Airlines | | Transaction ID: SB21B.36623.51 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6 |
| Mailing Address P.O. Box 66100 | | Amount of Each Disbursement this Period 386.09 |
| City Chicago State IL Zip Code 60666 | [MEMO ITEM] | |
| Purpose of Disbursement Airline Tickets | | 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) ▼ |

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| 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)
Progressive Patriots Fund

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. United Airlines | | Transaction ID: SB21B.36623.52 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6 |
| Mailing Address P.O. Box 66100 | | Amount of Each Disbursement this Period 498.19 |
| City Chicago State IL Zip Code 60666 | [MEMO ITEM] | |
| Purpose of Disbursement Airline Tickets 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. United Airlines | | Transaction ID: SB21B.36623.53 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6 |
| Mailing Address P.O. Box 66100 | | Amount of Each Disbursement this Period 180.09 |
| City Chicago State IL Zip Code 60666 | [MEMO ITEM] | |
| Purpose of Disbursement Airline Tickets 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. United Airlines | | Transaction ID: SB21B.36623.54 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6 |
| Mailing Address P.O. Box 66100 | | Amount of Each Disbursement this Period 180.09 |
| City Chicago State IL Zip Code 60666 | [MEMO ITEM] | |
| Purpose of Disbursement Airline Tickets 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) ▼ | |

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| 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)
Progressive Patriots Fund

| | | |
|--|-------------|--|
| Full Name (Last, First, Middle Initial) A. US Airways | | Transaction ID: SB21B.36623.56 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6 |
| Mailing Address 2345 Crystal Drive | | Amount of Each Disbursement this Period 314.30 |
| City Arlington State VA Zip Code 22227 | [MEMO ITEM] | |
| Purpose of Disbursement Airline Tickets | | 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) ▼ |

| | | |
|--|-------------|--|
| Full Name (Last, First, Middle Initial) B. US Airways | | Transaction ID: SB21B.36623.57 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6 |
| Mailing Address 2345 Crystal Drive | | Amount of Each Disbursement this Period 15.00 |
| City Arlington State VA Zip Code 22227 | [MEMO ITEM] | |
| Purpose of Disbursement Reservation Fees | | 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) ▼ |

| | | |
|--|-------------|--|
| Full Name (Last, First, Middle Initial) C. US Airways | | Transaction ID: SB21B.36623.58 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6 |
| Mailing Address 2345 Crystal Drive | | Amount of Each Disbursement this Period 20.00 |
| City Arlington State VA Zip Code 22227 | [MEMO ITEM] | |
| Purpose of Disbursement Reservation Fees | | 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) ▼ |

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| 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)
Progressive Patriots Fund

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Staples | | Transaction ID: SB21B.36623.59 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6 |
| Mailing Address P.O. Box 469 | | Amount of Each Disbursement this Period 99.83 |
| City Coppel State TX Zip Code 75019 | [MEMO ITEM] | |
| Purpose of Disbursement Office Supplies 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) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. US Airways | | Transaction ID: SB21B.36623.60 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6 |
| Mailing Address 2345 Crystal Drive | | Amount of Each Disbursement this Period 314.30 |
| City Arlington State VA Zip Code 22227 | [MEMO ITEM] | |
| Purpose of Disbursement Airline Tickets 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) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. US Airways | | Transaction ID: SB21B.36623.61 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6 |
| Mailing Address 2345 Crystal Drive | | Amount of Each Disbursement this Period 314.30 |
| City Arlington State VA Zip Code 22227 | [MEMO ITEM] | |
| Purpose of Disbursement Airline Tickets 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) ▼ | |

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| 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)
Progressive Patriots Fund

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. American Airlines | | Transaction ID: SB21B.36623.62 |
| Mailing Address 4255 Amon Carter Blvd. MD 2400 | | Date of Disbursement MM / DD / YYYY 05 / 12 / 2006 |
| City Fort Worth | State TX | Zip Code 76155 |
| Purpose of Disbursement Reservation Fees | | Amount of Each Disbursement this Period 40.00 |
| Candidate Name | | [MEMO ITEM] |
| 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: | | |

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|---|--|--|
| Full Name (Last, First, Middle Initial) B. Metropolitan Washington Airports Authority | | Transaction ID: SB21B.36623.63 |
| Mailing Address One Aviation Circle | | Date of Disbursement MM / DD / YYYY 05 / 15 / 2006 |
| City Washington | State DC | Zip Code 20001 |
| Purpose of Disbursement Parking | | Amount of Each Disbursement this Period 15.00 |
| Candidate Name | | [MEMO ITEM] |
| 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: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Le Parker Meridien | | Transaction ID: SB21B.36623.67 |
| Mailing Address 119 West 56th St. | | Date of Disbursement MM / DD / YYYY 05 / 15 / 2006 |
| City New York | State NY | Zip Code 10019 |
| Purpose of Disbursement Travel Expense: Lodging | | Amount of Each Disbursement this Period 374.50 |
| Candidate Name | | [MEMO ITEM] |
| 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: | | |

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| 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)
Progressive Patriots Fund

| | | |
|--|-------------|--|
| Full Name (Last, First, Middle Initial) A. Le Parker Meridien | | Transaction ID: SB21B.36623.68 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6 |
| Mailing Address 119 West 56th St. | | Amount of Each Disbursement this Period 348.39 |
| City New York State NY Zip Code 10019 | [MEMO ITEM] | |
| Purpose of Disbursement Travel Expense: Lodging | | 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) ▼ |

| | | |
|--|-------------|--|
| Full Name (Last, First, Middle Initial) B. Carey Limousine | | Transaction ID: SB21B.36623.70 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6 |
| Mailing Address 6023 Bristol Pkwy | | Amount of Each Disbursement this Period 989.53 |
| City Culver City State CA Zip Code 90230 | [MEMO ITEM] | |
| Purpose of Disbursement Car Service | | 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) ▼ |

| | | |
|--|-------------|--|
| Full Name (Last, First, Middle Initial) C. Travelocity | | Transaction ID: SB21B.36623.71 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6 |
| Mailing Address 3150 Sabre Drive | | Amount of Each Disbursement this Period 10.00 |
| City Southlake State TX Zip Code 76092 | [MEMO ITEM] | |
| Purpose of Disbursement Reservation Fee | | 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) ▼ |

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| 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)
Progressive Patriots Fund

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Loews Regency Hotel | | Transaction ID: SB21B.36623.72 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6 |
| Mailing Address 540 Park Ave | | Amount of Each Disbursement this Period 97.82 [MEMO ITEM] |
| City New York State NY Zip Code 10021 | | |
| Purpose of Disbursement Travel Expense: Food and Beverage 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Kelley's Market | | Transaction ID: SB21B.39795 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 6 |
| Mailing Address 633 Junction Rd | | Amount of Each Disbursement this Period 48.36 |
| City Madison State WI Zip Code 53717 | | |
| Purpose of Disbursement Travel Expense: Gas 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Landmark Building | | Transaction ID: SB21B.39779 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6 |
| Mailing Address 316 N Milwaukee St. | | Amount of Each Disbursement this Period 500.00 |
| City Milwaukee State WI Zip Code 53202 | | |
| Purpose of Disbursement Office Rent 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) ▶ | 548.36 |
| TOTAL 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)
Progressive Patriots Fund

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Lenee Kruse | | Transaction ID: SB21B.39771 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6 |
| Mailing Address 320 Constitution Ave NE Apt | | Amount of Each Disbursement this Period 954.19 |
| City Washington State DC Zip Code 20002 | Purpose of Disbursement Payroll Candidate Name Category/Type | |
| 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: | | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. Lenee Kruse | | Transaction ID: SB21B.39829 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6 |
| Mailing Address 320 Constitution Ave NE Apt | | Amount of Each Disbursement this Period 954.19 |
| City Washington State DC Zip Code 20002 | Purpose of Disbursement Payroll Candidate Name Category/Type | |
| 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: | | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. Lenee Kruse | | Transaction ID: SB21B.39865 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6 |
| Mailing Address 320 Constitution Ave NE Apt | | Amount of Each Disbursement this Period 972.28 |
| City Washington State DC Zip Code 20002 | Purpose of Disbursement Payroll Candidate Name Category/Type | |
| 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: | | |

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|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2880.66 |
| 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)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. M&I Bank | | Transaction ID: SB21B.36830 Date of Disbursement MM / DD / YYYY 06 / 23 / 2006 |
| Mailing Address 1 W Main | | Amount of Each Disbursement this Period 74.01 |
| City Madison State WI Zip Code 53703 | Purpose of Disbursement Credit Card Payment: See Memo Entry 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) ▼ | Category/Type |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Staples | | Transaction ID: SB21B.36830.0 Date of Disbursement MM / DD / YYYY 06 / 23 / 2006 |
| Mailing Address P.O. Box 469 | | Amount of Each Disbursement this Period 74.01 |
| City Coppell State TX Zip Code 75019 | Purpose of Disbursement Office 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) ▼ | Category/Type [MEMO ITEM] |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Makese Motley | | Transaction ID: SB21B.39770 Date of Disbursement MM / DD / YYYY 06 / 01 / 2006 |
| Mailing Address 1017 Otis Pl, NW | | Amount of Each Disbursement this Period 921.76 |
| 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) ▼ | Category/Type |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 995.77 |
| 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)

PAGE 72 / 118

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Makese Motley | | Transaction ID: SB21B.39828 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6 |
| Mailing Address 1017 Otis Pl, NW | | Amount of Each Disbursement this Period 921.76 |
| City Washington State DC Zip Code 20010 | Purpose of Disbursement Payroll 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Makese Motley | | Transaction ID: SB21B.36833 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6 |
| Mailing Address 1017 Otis Pl, NW | | Amount of Each Disbursement this Period 22.83 |
| City Washington State DC Zip Code 20010 | Purpose of Disbursement Reimbursement: See Memo Entries 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Postmaster | | Transaction ID: SB21B.36833.0 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6 |
| Mailing Address 3902 Milwaukee Street | | Amount of Each Disbursement this Period 18.28 |
| City Madison State WI Zip Code 53714 | Purpose of Disbursement Administrative Expense: Postage 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] |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 944.59 |
| 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)

PAGE 73 / 118

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) A. Postmaster | | Transaction ID: SB21B.36833.1 Date of Disbursement MM / DD / YYYY 06 / 16 / 2006 | |
| Mailing Address 3902 Milwaukee Street | | Amount of Each Disbursement this Period 4.55 | |
| City Madison State WI Zip Code 53714 | Purpose of Disbursement Administrative Expense: Postage | 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: | [MEMO ITEM] | | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) B. Makeese Motley | | Transaction ID: SB21B.39864 Date of Disbursement MM / DD / YYYY 06 / 29 / 2006 | |
| Mailing Address 1017 Otis Pl, NW | | Amount of Each Disbursement this Period 932.63 | |
| City Washington State DC Zip Code 20010 | Purpose of Disbursement Payroll | 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: | | | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) C. Mal Warwick and Associates | | Transaction ID: SB21B.39781 Date of Disbursement MM / DD / YYYY 06 / 01 / 2006 | |
| Mailing Address 2550 Ninth Street, Suite 103 | | Amount of Each Disbursement this Period 17500.00 | |
| City Berkeley State CA Zip Code 94710-2516 | Purpose of Disbursement Direct Mail | 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: | | | |

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|--|----------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 18432.63 |
| 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 74 / 118

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Mal Warwick and Associates | | Transaction ID: SB21B.39788 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6 |
| Mailing Address 2550 Ninth Street, Suite 103 | | Amount of Each Disbursement this Period 57500.00 |
| City Berkeley State CA Zip Code 94710-2516 | | |
| Purpose of Disbursement Direct Mail 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) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Mal Warwick and Associates | | Transaction ID: SB21B.39812 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6 |
| Mailing Address 2550 Ninth Street, Suite 103 | | Amount of Each Disbursement this Period 3500.00 |
| City Berkeley State CA Zip Code 94710-2516 | | |
| Purpose of Disbursement Retainer: Direct Mail Fundraising 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) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Mal Warwick and Associates | | Transaction ID: SB21B.39846 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 6 |
| Mailing Address 2550 Ninth Street, Suite 103 | | Amount of Each Disbursement this Period 95000.00 |
| City Berkeley State CA Zip Code 94710-2516 | | |
| Purpose of Disbursement Retainer: Direct Mail Fundraising 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) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 156000.00 |
| TOTAL 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)

PAGE 75 / 118

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Matt Baldwin | | Transaction ID: SB21B.39859 Date of Disbursement MM / DD / YYYY 06 / 26 / 2006 |
| Mailing Address 190 E 7th St Apt 307 | | Amount of Each Disbursement this Period 270.00 |
| City New York State NY Zip Code 10009 | Purpose of Disbursement Event Supply Rental 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Max Gleichman | | Transaction ID: SB21B.39760 Date of Disbursement MM / DD / YYYY 06 / 01 / 2006 |
| Mailing Address 1915 N Prospect Ave #8 | | Amount of Each Disbursement this Period 569.44 |
| City Milwaukee State WI Zip Code 53202 | Purpose of Disbursement Payroll 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Max Gleichman | | Transaction ID: SB21B.36613 Date of Disbursement MM / DD / YYYY 06 / 07 / 2006 |
| Mailing Address 1915 N Prospect Ave #8 | | Amount of Each Disbursement this Period 155.47 |
| City Milwaukee State WI Zip Code 53202 | Purpose of Disbursement Reimbursement: See Memo Entries Candidate Name Category/Type 001 | |
| 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) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 994.91 |
| 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)

PAGE 76 / 118

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|-------------|---|
| Full Name (Last, First, Middle Initial) A. FedEx Kinkos | | Transaction ID: SB21B.36613.0 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6 |
| Mailing Address 7805 Mineral Point Rd | | Amount of Each Disbursement this Period 79.63 |
| City Madison State WI Zip Code 53717 | [MEMO ITEM] | |
| Purpose of Disbursement Shipping Candidate Name | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | |

| | | |
|--|-------------|---|
| Full Name (Last, First, Middle Initial) B. Postmaster | | Transaction ID: SB21B.36613.1 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 6 |
| Mailing Address 3902 Milwaukee Street | | Amount of Each Disbursement this Period 33.49 |
| City Madison State WI Zip Code 53714 | [MEMO ITEM] | |
| Purpose of Disbursement Administrative Expense: Postage Candidate Name | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | |

| | | |
|--|-------------|---|
| Full Name (Last, First, Middle Initial) C. Postmaster | | Transaction ID: SB21B.36613.2 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 6 |
| Mailing Address 3902 Milwaukee Street | | Amount of Each Disbursement this Period 4.34 |
| City Madison State WI Zip Code 53714 | [MEMO ITEM] | |
| Purpose of Disbursement Administrative Expense: Postage Candidate Name | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | |

| | |
|--|------|
| 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 77 / 118

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) A. Postmaster | | Transaction ID: SB21B.36613.3 Date of Disbursement MM / DD / YYYY 06 / 05 / 2006 | |
| Mailing Address 3902 Milwaukee Street | | Amount of Each Disbursement this Period 1.11 | |
| City Madison State WI Zip Code 53714 | Purpose of Disbursement Administrative Expense: Postage | 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: | [MEMO ITEM] | | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) B. OfficeMax | | Transaction ID: SB21B.36613.4 Date of Disbursement MM / DD / YYYY 06 / 02 / 2006 | |
| Mailing Address 7431 West Towne Way | | Amount of Each Disbursement this Period 3.15 | |
| City Madison State WI Zip Code 53719 | Purpose of Disbursement Office Supplies | 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: | [MEMO ITEM] | | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) C. OfficeMax | | Transaction ID: SB21B.36613.5 Date of Disbursement MM / DD / YYYY 06 / 02 / 2006 | |
| Mailing Address 7431 West Towne Way | | Amount of Each Disbursement this Period 33.75 | |
| City Madison State WI Zip Code 53719 | Purpose of Disbursement Office Supplies | 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: | [MEMO ITEM] | | |

| | |
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| 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 78 / 118

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Max Gleichman | | Transaction ID: SB21B.39832 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6 |
| Mailing Address 1915 N Prospect Ave #8 | | Amount of Each Disbursement this Period 548.81 |
| City Milwaukee State WI Zip Code 53202 | Category/ Type | |
| 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Max Gleichman | | Transaction ID: SB21B.39899 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 6 |
| Mailing Address 1915 N Prospect Ave #8 | | Amount of Each Disbursement this Period 68.95 |
| City Milwaukee State WI Zip Code 53202 | Category/ Type | |
| Purpose of Disbursement Reimbursement: See Memo Entry | | |
| 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Postmaster | | Transaction ID: SB21B.39899.0 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 6 |
| Mailing Address 3902 Milwaukee Street | | Amount of Each Disbursement this Period 68.95 |
| City Madison State WI Zip Code 53714 | Category/ Type | |
| Purpose of Disbursement Administrative Expense: Postage | | |
| 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) ▼ | |

[MEMO ITEM]

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 617.76 |
| 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 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)
Progressive Patriots Fund

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Max Gleichman | | Transaction ID: SB21B.39860 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6 |
| Mailing Address 1915 N Prospect Ave #8 | | Amount of Each Disbursement this Period 579.23 |
| City Milwaukee State WI Zip Code 53202 | Purpose of Disbursement Payroll 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) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Office of Tax and Revenue | | Transaction ID: SB21B.39772 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6 |
| Mailing Address 941 North Capitol Street, NE | | Amount of Each Disbursement this Period 417.50 |
| City Washington State DC Zip Code 20002 | Purpose of Disbursement Income Tax Withheld 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) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Office of Tax and Revenue | | Transaction ID: SB21B.39818 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6 |
| Mailing Address 941 North Capitol Street, NE | | Amount of Each Disbursement this Period 417.50 |
| City Washington State DC Zip Code 20002 | Purpose of Disbursement Income Tax Withheld 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) ▼ | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1414.23 |
| 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

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)
Progressive Patriots Fund

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Office of Tax and Revenue | | Transaction ID: SB21B.39874 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6 |
| Mailing Address 941 North Capitol Street, NE | | Amount of Each Disbursement this Period 420.50 |
| City Washington State DC Zip Code 20002 | Purpose of Disbursement Income Tax Withheld 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Park Bank | | Transaction ID: SB21B.39774 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6 |
| Mailing Address 1801 Greenway Cross | | Amount of Each Disbursement this Period 4112.36 |
| City Madison State WI Zip Code 53708 | Purpose of Disbursement 941 Deposit 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Park Bank | | Transaction ID: SB21B.39775 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6 |
| Mailing Address 1801 Greenway Cross | | Amount of Each Disbursement this Period 34.01 |
| City Madison State WI Zip Code 53708 | Purpose of Disbursement Federal Unemployment Tax 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) ▶ | 4566.87 |
| 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)
Progressive Patriots Fund

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Park Bank | | Transaction ID: SB21B.39785 Date of Disbursement |
| Mailing Address 1801 Greenway Cross | | <input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2006"/> |
| City Madison | State WI | Zip Code 53708 |
| Purpose of Disbursement Banking Fee | | Amount of Each Disbursement this Period <input type="text" value="60.00"/> |
| 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: | Category/Type | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. Park Bank | | Transaction ID: SB21B.39806 Date of Disbursement |
| Mailing Address 1801 Greenway Cross | | <input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2006"/> |
| City Madison | State WI | Zip Code 53708 |
| Purpose of Disbursement Banking Fees | | Amount of Each Disbursement this Period <input type="text" value="1478.11"/> |
| 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: | Category/Type | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) C. Park Bank | | Transaction ID: SB21B.39817 Date of Disbursement |
| Mailing Address 1801 Greenway Cross | | <input type="text" value="06"/> / <input type="text" value="15"/> / <input type="text" value="2006"/> |
| City Madison | State WI | Zip Code 53708 |
| Purpose of Disbursement Federal Unemployment Tax | | Amount of Each Disbursement this Period <input type="text" value="26.75"/> |
| 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: | Category/Type | |

| | |
|--|--------------------------------------|
| SUBTOTAL of Disbursements This Page (optional) | <input type="text" value="1564.86"/> |
| TOTAL 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 82 / 118

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Park Bank | | Transaction ID: SB21B.39825 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6 |
| Mailing Address 1801 Greenway Cross | | Amount of Each Disbursement this Period 4095.88 |
| City Madison State WI Zip Code 53708 | Purpose of Disbursement 941 Deposit 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) ▼ | Category/Type |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Park Bank | | Transaction ID: SB21B.39867 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6 |
| Mailing Address 1801 Greenway Cross | | Amount of Each Disbursement this Period 4149.30 |
| City Madison State WI Zip Code 53708 | Purpose of Disbursement 941 Deposit 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) ▼ | Category/Type |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Park Bank | | Transaction ID: SB21B.39868 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6 |
| Mailing Address 1801 Greenway Cross | | Amount of Each Disbursement this Period 13.16 |
| City Madison State WI Zip Code 53708 | Purpose of Disbursement Federal Unemployment Tax 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) ▼ | Category/Type |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 8258.34 |
| TOTAL 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)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Douglas Patinkin | | Transaction ID: SB21B.39723 Date of Disbursement 06 / 23 / 2006 |
| Mailing Address 1252 W. Wrightwood Avenue | | Amount of Each Disbursement this Period 500.00 |
| City Chicago State IL Zip Code 60614 | Purpose of Disbursement In-kind - Event Expense: Decorations | |
| 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) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Jenny Patinkin | | Transaction ID: SB21B.39727 Date of Disbursement 06 / 23 / 2006 |
| Mailing Address 1252 W. Wrightwood Avenue | | Amount of Each Disbursement this Period 3000.00 |
| City Chicago State IL Zip Code 60607 | Purpose of Disbursement In-kind - Event Expense: Catering | |
| 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) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Patti Jo McCann | | Transaction ID: SB21B.39768 Date of Disbursement 06 / 01 / 2006 |
| Mailing Address 1207 C St, NE | | Amount of Each Disbursement this Period 2091.72 |
| City Washington State DC Zip Code 20002 | Purpose of Disbursement Payroll | |
| 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) ▶ | 5591.72 |
| 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)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|--|---|
| A. Full Name (Last, First, Middle Initial) Patti Jo McCann | | Transaction ID: SB21B.39827 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6 |
| Mailing Address 1207 C St, NE | | Amount of Each Disbursement this Period 2091.73 |
| City Washington State DC Zip Code 20002 | Category/ Type | |
| 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. Full Name (Last, First, Middle Initial) Patti Jo McCann | | Transaction ID: SB21B.39861 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6 |
| Mailing Address 1207 C St, NE | | Amount of Each Disbursement this Period 2091.74 |
| City Washington State DC Zip Code 20002 | Category/ Type | |
| 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) ▼ | |

| | | |
|--|--|---|
| C. Full Name (Last, First, Middle Initial) Patti Jo McCann | | Transaction ID: SB21B.39879 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6 |
| Mailing Address 1207 C St, NE | | Amount of Each Disbursement this Period 125.96 |
| City Washington State DC Zip Code 20002 | Category/ Type | |
| Purpose of Disbursement Reimbursement: See Memo Text | | |
| 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) ▼ | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 4309.43 |
| 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)
Progressive Patriots Fund

| | | | |
|--|---|--|--|
| <p>A. Full Name (Last, First, Middle Initial) Paula Zellner</p> | | <p>Transaction ID: SB21B.36755 Date of Disbursement</p> | |
| <p>Mailing Address 619 W Richmond St</p> | | <p><input type="text" value="06"/> / <input type="text" value="01"/> / <input type="text" value="2006"/></p> | |
| <p>City Shawano State WI Zip Code 54166</p> | <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1411.46"/></p> | | |
| <p>Purpose of Disbursement Reimbursement: See Memo Text</p> | <p><input type="text"/> Category/Type</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. Full Name (Last, First, Middle Initial) Paula Zellner</p> | | <p>Transaction ID: SB21B.36755.0 Date of Disbursement</p> | |
| <p>Mailing Address 619 W Richmond St</p> | | <p><input type="text" value="06"/> / <input type="text" value="01"/> / <input type="text" value="2006"/></p> | |
| <p>City Shawano State WI Zip Code 54166</p> | <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="80.00"/></p> | | |
| <p>Purpose of Disbursement Reimbursement: Mileage</p> | <p><input type="text"/> Category/Type</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> | | |

[MEMO ITEM]

| | | | |
|--|---|--|--|
| <p>C. Full Name (Last, First, Middle Initial) United Airlines</p> | | <p>Transaction ID: SB21B.36755.5 Date of Disbursement</p> | |
| <p>Mailing Address P.O. Box 66100</p> | | <p><input type="text" value="05"/> / <input type="text" value="04"/> / <input type="text" value="2006"/></p> | |
| <p>City Chicago State IL Zip Code 60666</p> | <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="461.70"/></p> | | |
| <p>Purpose of Disbursement Airline Tickets</p> | <p><input type="text"/> Category/Type</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> | | |

[MEMO ITEM]

| | |
|---|---|
| <p>SUBTOTAL of Disbursements This Page (optional)</p> | <p><input type="text" value="1411.46"/></p> |
| <p>TOTAL 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)
Progressive Patriots Fund

| | | |
|--|-------------|--|
| Full Name (Last, First, Middle Initial) A. United Airlines | | Transaction ID: SB21B.36755.6 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6 |
| Mailing Address P.O. Box 66100 | | Amount of Each Disbursement this Period 373.53 |
| City Chicago State IL Zip Code 60666 | [MEMO ITEM] | |
| Purpose of Disbursement Airline Tickets | | 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) ▼ |

| | | |
|--|-------------|--|
| Full Name (Last, First, Middle Initial) B. Enterprise Rent-A-Car | | Transaction ID: SB21B.36755.9 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 6 |
| Mailing Address 600 Corporate Park Drive | | Amount of Each Disbursement this Period 169.74 |
| City St. Louis State MO Zip Code 63105 | [MEMO ITEM] | |
| Purpose of Disbursement Rental Car | | 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) ▼ |

| | | |
|--|-------------|--|
| Full Name (Last, First, Middle Initial) C. Paula Zellner | | Transaction ID: SB21B.39767 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6 |
| Mailing Address 619 W Richmond St | | Amount of Each Disbursement this Period 679.01 |
| City Shawano State WI Zip Code 54166 | [MEMO ITEM] | |
| Purpose of Disbursement Payroll | | 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) ▼ |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 679.01 |
| 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)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Paula Zellner | | Transaction ID: SB21B.39823 Date of Disbursement 06 / 15 / 2006 |
| Mailing Address 619 W Richmond St | | Amount of Each Disbursement this Period 679.00 |
| City Shawano State WI Zip Code 54166 | Category/ Type | |
| 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) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Paula Zellner | | Transaction ID: SB21B.39862 Date of Disbursement 06 / 29 / 2006 |
| Mailing Address 619 W Richmond St | | Amount of Each Disbursement this Period 696.28 |
| City Shawano State WI Zip Code 54166 | Category/ Type | |
| 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) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Pepco | | Transaction ID: SB21B.39789 Date of Disbursement 06 / 06 / 2006 |
| Mailing Address 701 Ninth St., NW | | Amount of Each Disbursement this Period 63.67 |
| City Washington State DC Zip Code 20068 | Category/ Type | |
| Purpose of Disbursement Utilities Expense | | |
| 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) ▼ | |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1438.95 |
| 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)

PAGE 88 / 118

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Postmaster | | Transaction ID: SB21B.39782 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6 |
| Mailing Address 3902 Milwaukee Street | | Amount of Each Disbursement this Period 31.05 |
| City Madison State WI Zip Code 53714 | Purpose of Disbursement Administrative Expense: Postage 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) ▼ | Category/Type |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Postmaster | | Transaction ID: SB21B.39784 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 6 |
| Mailing Address 3902 Milwaukee Street | | Amount of Each Disbursement this Period 26.38 |
| City Madison State WI Zip Code 53714 | Purpose of Disbursement Administrative Expense: Postage 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) ▼ | Category/Type |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Postmaster | | Transaction ID: SB21B.39799 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 6 |
| Mailing Address 3902 Milwaukee Street | | Amount of Each Disbursement this Period 945.00 |
| City Madison State WI Zip Code 53714 | Purpose of Disbursement Administrative Expense: Postage 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) ▼ | Category/Type |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1002.43 |
| 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 89 / 118

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | | |
|---|--|--|---|
| Full Name (Last, First, Middle Initial) A. Postmaster | | Transaction ID: SB21B.39803 | |
| Mailing Address 3902 Milwaukee Street | | Date of Disbursement 06 / 08 / 2006 | |
| City Madison | State WI | Zip Code 53714 | Amount of Each Disbursement this Period 213.80 |
| Purpose of Disbursement Administrative Expense: Postage | | 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: | | | |

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) B. Postmaster | | Transaction ID: SB21B.39807 | |
| Mailing Address 3902 Milwaukee Street | | Date of Disbursement 06 / 12 / 2006 | |
| City Madison | State WI | Zip Code 53714 | Amount of Each Disbursement this Period 34.11 |
| Purpose of Disbursement Administrative Expense: Postage | | 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: | | | |

| | | | |
|---|--|--|---|
| Full Name (Last, First, Middle Initial) C. Postmaster | | Transaction ID: SB21B.36794 | |
| Mailing Address 3902 Milwaukee Street | | Date of Disbursement 06 / 19 / 2006 | |
| City Madison | State WI | Zip Code 53714 | Amount of Each Disbursement this Period 372.79 |
| Purpose of Disbursement Administrative Expense: Postage | | 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: | | | |

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| SUBTOTAL of Disbursements This Page (optional) | 620.70 |
| 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)
Progressive Patriots Fund

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Postmaster | | Transaction ID: SB21B.39852 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 6 |
| Mailing Address 3902 Milwaukee Street | | Amount of Each Disbursement this Period 120.00 |
| City Madison State WI Zip Code 53714 | Category/ Type | |
| Purpose of Disbursement Administrative Expense: Postage | | |
| 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Postmaster | | Transaction ID: SB21B.39854 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 6 |
| Mailing Address 3902 Milwaukee Street | | Amount of Each Disbursement this Period 79.80 |
| City Madison State WI Zip Code 53714 | Category/ Type | |
| Purpose of Disbursement Administrative Expense: Postage | | |
| 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) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Postmaster | | Transaction ID: SB21B.39855 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6 |
| Mailing Address 3902 Milwaukee Street | | Amount of Each Disbursement this Period 240.00 |
| City Madison State WI Zip Code 53714 | Category/ Type | |
| Purpose of Disbursement Administrative Expense: Postage | | |
| 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) ▼ | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 439.80 |
| 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)
Progressive Patriots Fund

| | | |
|--|--|---|
| A. Postmaster Full Name (Last, First, Middle Initial) Mailing Address 3902 Milwaukee Street City Madison State WI Zip Code 53714 Purpose of Disbursement Administrative Expense: Postage 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.39857 Date of Disbursement: M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6 Amount of Each Disbursement this Period: 14.40 Category/Type |
|--|--|---|

| | | |
|---|--|---|
| B. Potomac Development, Corp Full Name (Last, First, Middle Initial) Mailing Address 900 2nd St, NE Suite 114 City Washington State DC Zip Code 20002 Purpose of Disbursement Office Rent 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.39778 Date of Disbursement: M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period: 1475.07 Category/Type |
|---|--|---|

| | | |
|---|--|---|
| C. Quickbooks Payroll Service Full Name (Last, First, Middle Initial) Mailing Address 2632 Marine Way City Mountain View State CA Zip Code 94043 Purpose of Disbursement Payroll Processing Fee 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.39783 Date of Disbursement: M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period: 83.00 Category/Type |
|---|--|---|

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1572.47 |
| 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)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Quickbooks Payroll Service | | Transaction ID: SB21B.39834 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6 |
| Mailing Address 2632 Marine Way | | Amount of Each Disbursement this Period 21.50 |
| City Mountain View State CA Zip Code 94043 | | |
| Purpose of Disbursement Payroll Processing Fee | | 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: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Quickbooks Payroll Service | | Transaction ID: SB21B.39866 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6 |
| Mailing Address 2632 Marine Way | | Amount of Each Disbursement this Period 20.00 |
| City Mountain View State CA Zip Code 94043 | | |
| Purpose of Disbursement Payroll Processing Fee | | 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: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. S+Y Consulting, LLC | | Transaction ID: SB21B.39814 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6 |
| Mailing Address 2122 P Street, NW, Suite 303 | | Amount of Each Disbursement this Period 4000.00 |
| City Washington State DC Zip Code 20037 | | |
| Purpose of Disbursement Retainer - Fundraising Consulting | | 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: | | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 4041.50 |
| 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)
Progressive Patriots Fund

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. StreamGuys, Inc | | Transaction ID: SB21B.39836 Date of Disbursement 06 / 16 / 2006 |
| Mailing Address PO Box 828 | | Amount of Each Disbursement this Period 300.00 |
| City Arcata State CA Zip Code 95518 | Purpose of Disbursement Online Media Storage Candidate Name <input type="text"/> 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) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. TDS Telecom | | Transaction ID: SB21B.39844 Date of Disbursement 06 / 19 / 2006 |
| Mailing Address PO Box 620070 | | Amount of Each Disbursement this Period 172.26 |
| City Middleton State WI Zip Code 53562 | Purpose of Disbursement Phone Expense Candidate Name <input type="text"/> 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) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Time Warner Cable | | Transaction ID: SB21B.39856 Date of Disbursement 06 / 23 / 2006 |
| Mailing Address PO Box 3237 | | Amount of Each Disbursement this Period 39.92 |
| City Milwaukee State WI Zip Code 53201 | Purpose of Disbursement Internet Service Candidate Name <input type="text"/> 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) ▼ | |

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|--|----------------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 512.18 |
| TOTAL 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 94 / 118

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) A. Trevor Miller | | Transaction ID: SB21B.39766 | |
| Mailing Address W205S8335 Pasadena Dr | | Date of Disbursement MM / DD / YYYY 06 / 01 / 2006 | |
| City Muskego | State WI | Zip Code 53150 | Amount of Each Disbursement this Period 1088.29 |
| Purpose of Disbursement Payroll | | 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: | | | |

| | | | |
|---|--|--|---|
| Full Name (Last, First, Middle Initial) B. Trevor Miller | | Transaction ID: SB21B.36839 | |
| Mailing Address W205S8335 Pasadena Dr | | Date of Disbursement MM / DD / YYYY 06 / 14 / 2006 | |
| City Muskego | State WI | Zip Code 53150 | Amount of Each Disbursement this Period 153.35 |
| Purpose of Disbursement Reimbursement: See Memo Entries & Text | | 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: | | | |

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) C. Midwest Express | | Transaction ID: SB21B.36839.4 | |
| Mailing Address 6744 South Howell Avenue | | Date of Disbursement MM / DD / YYYY 06 / 07 / 2006 | |
| City Oak Creek | State WI | Zip Code 53154 | Amount of Each Disbursement this Period 25.00 |
| Purpose of Disbursement Airline Service Fee | | 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: | | | |

[MEMO ITEM]

| | | |
|--|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 1241.64 |
| 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)

PAGE 95 / 118

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) A. Trevor Miller | | Transaction ID: SB21B.39819 | |
| Mailing Address W205S8335 Pasadena Dr | | Date of Disbursement 06 / 15 / 2006 | |
| City Muskego | State WI | Zip Code 53150 | Amount of Each Disbursement this Period 1088.30 |
| Purpose of Disbursement Payroll | | 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: | | | |

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) B. Trevor Miller | | Transaction ID: SB21B.39863 | |
| Mailing Address W205S8335 Pasadena Dr | | Date of Disbursement 06 / 29 / 2006 | |
| City Muskego | State WI | Zip Code 53150 | Amount of Each Disbursement this Period 1105.44 |
| Purpose of Disbursement Payroll | | 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: | | | |

| | | | |
|---|--|--|---|
| Full Name (Last, First, Middle Initial) C. Truda Bloom | | Transaction ID: SB21B.39811 | |
| Mailing Address 18 Windsor Blvd | | Date of Disbursement 06 / 14 / 2006 | |
| City Londonderry | State NH | Zip Code 03053 | Amount of Each Disbursement this Period 250.00 |
| Purpose of Disbursement Photography | | 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) | 2443.74 |
| 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 96 / 118

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Verizon | | Transaction ID: SB21B.39805 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 |
| Mailing Address PO Box 17577 | | Amount of Each Disbursement this Period 119.65 |
| City Baltimore | State MD | |
| Zip Code 21297-0513 | | |
| Purpose of Disbursement Phone Expense | | |
| Candidate Name | | Category/ Type |
| 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: | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. Verizon Wireless | | Transaction ID: SB21B.39841 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 6 |
| Mailing Address PO Box 17464 | | Amount of Each Disbursement this Period 87.86 |
| City Baltimore | State MD | |
| Zip Code 21297 | | |
| Purpose of Disbursement Cell Phone Expense | | |
| Candidate Name | | Category/ Type |
| 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: | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) C. Voicetext Interactive | | Transaction ID: SB21B.39792 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6 |
| Mailing Address 211 East 7th Street, 12th Floor | | Amount of Each Disbursement this Period 75.33 |
| City Austin | State TX | |
| Zip Code 78701 | | |
| Purpose of Disbursement Conference Call Fees | | |
| Candidate Name | | Category/ Type |
| 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) ▶

282.84

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)

PAGE 97 / 118

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Weber Printing Co. | | Transaction ID: SB21B.39791 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6 |
| Mailing Address 3048 North 34th St | | Amount of Each Disbursement this Period 278.78 |
| City Milwaukee State WI Zip Code 53210 | Purpose of Disbursement Printing: Business Cards 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) ▼ | Category/ Type |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Wisconsin Department of Revenue | | Transaction ID: SB21B.39758 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6 |
| Mailing Address PO Box 8902 | | Amount of Each Disbursement this Period 420.51 |
| City Madison State WI Zip Code 53708 | Purpose of Disbursement Income Tax Withheld 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) ▼ | Category/ Type |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Wisconsin Department of Revenue | | Transaction ID: SB21B.39821 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6 |
| Mailing Address PO Box 8902 | | Amount of Each Disbursement this Period 417.43 |
| City Madison State WI Zip Code 53708 | Purpose of Disbursement Income Tax Withheld 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) ▼ | Category/ Type |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1116.72 |
| 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)

PAGE 98 / 118

| | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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)
Progressive Patriots Fund

Full Name (Last, First, Middle Initial)

A. Wisconsin Department of Revenue

Mailing Address PO Box 8902

City Madison State WI Zip Code 53708

Purpose of Disbursement
Income Tax Withheld

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.39870

Date of Disbursement

06 / 29 / 2006

Amount of Each Disbursement this Period

428.26

SUBTOTAL of Disbursements This Page (optional)

428.26

TOTAL This Period (last page this line number only)

284984.25

SCHEDULE 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 99 / 118

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. BLOGPAC | | Transaction ID: SB23.36736 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 6 |
| Mailing Address P.O. Box 30727 | | Amount of Each Disbursement this Period 2000.00 |
| City Philadelphia State PA Zip Code 19104 | 011 Category/ Type | |
| Purpose of Disbursement Contribution to Political Committee 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) ▼ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Braley for Congress | | Transaction ID: SB23.36587 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6 |
| Mailing Address PO Box 390 | | Amount of Each Disbursement this Period 3000.00 |
| City Waterloo State IA Zip Code 50704 | 011 Category/ Type | |
| Purpose of Disbursement Contribution to Federal Candidate Candidate Name Bruce Braley | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 01 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Brown for Congress | | Transaction ID: SB23.36799 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6 |
| Mailing Address P. O. Box 4506 | | Amount of Each Disbursement this Period 900.00 |
| City Auburn State CA Zip Code 95604 | Category/ Type | |
| Purpose of Disbursement Contribution to Federal Candidate Candidate Name Charles Brown | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 04 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 5900.00 |
| 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 100 / 118

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Carter for Senate Committee | | Transaction ID: SB23.36579 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6 |
| Mailing Address 3069 Conquista Ct | | Amount of Each Disbursement this Period 2000.00 |
| City Las Vegas | State NV | |
| Zip Code 89121 | | |
| Purpose of Disbursement Contribution to Federal Candidate | | |
| Candidate Name Jack Carter | | 011 Category/ Type |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: NV | District: 00 | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Colorado Democratic Party | | Transaction ID: SB23.36540 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6 |
| Mailing Address 777 Sante Fe Drive | | Amount of Each Disbursement this Period 3000.00 |
| City Denver | State CO | |
| Zip Code 80204 | | |
| Purpose of Disbursement Contribution to State Party | | |
| Candidate Name Colorado Democratic Party | | 011 Category/ Type |
| 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: | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Democratic Party of Arkansas | | Transaction ID: SB23.36557 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6 |
| Mailing Address 1300 West Capitol Avenue | | Amount of Each Disbursement this Period 500.00 |
| City Little Rock | State AR | |
| Zip Code 72201 | | |
| Purpose of Disbursement Contribution to State Party | | |
| Candidate Name Democratic Party of Arkansas | | 011 Category/ Type |
| 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) ▶ | 5500.00 |
| 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 101 / 118

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Democratic Party of Wisconsin | | Transaction ID: SB23.59836 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6 |
| Mailing Address 222 West Washington Ave, Suite 150 | | Amount of Each Disbursement this Period 900.00 |
| City Madison State WI Zip Code 53703 | Purpose of Disbursement Contribution to State Party Candidate Name Category/Type | |
| 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: | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Friends of Jim Marshall | | Transaction ID: SB23.36581 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6 |
| Mailing Address PO Box 125 | | Amount of Each Disbursement this Period 2000.00 |
| City Macon State GA Zip Code 31201 | Purpose of Disbursement Contribution to Federal Candidate Candidate Name Category/Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: GA District: 08 | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Friends OF John Barrow | | Transaction ID: SB23.36583 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6 |
| Mailing Address PO Box 8166 | | Amount of Each Disbursement this Period 2000.00 |
| City Savannah State GA Zip Code 31412 | Purpose of Disbursement Contribution to Federal Candidate Candidate Name Category/Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: GA District: 12 | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 4900.00 |
| 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 102 / 118

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | | |
|---|--|--|-------------------|
| Full Name (Last, First, Middle Initial) A. Friends of John Laesch | | Transaction ID: SB23.36803 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6 | |
| Mailing Address PO Box 481 | | Amount of Each Disbursement this Period 1000.00 | |
| City Yorkville | State IL Zip Code 60560 | | |
| Purpose of Disbursement Contribution to Federal Candidate | | | Category/ Type |
| Candidate Name John Laesch | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: IL District: 14 | | | |

| | | | |
|---|--|--|-------------------|
| Full Name (Last, First, Middle Initial) B. Friends of Tammy Duckworth | | Transaction ID: SB23.36577 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6 | |
| Mailing Address 416 W 22nd St. | | Amount of Each Disbursement this Period 1000.00 | |
| City Lombard | State IL Zip Code 60148 | | |
| Purpose of Disbursement Contribution to Federal Candidate | | | Category/ Type |
| Candidate Name Tammy Duckworth | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: IL District: 06 | | | |

| | | | |
|---|--|--|-------------------|
| Full Name (Last, First, Middle Initial) C. James Webb for US Senate | | Transaction ID: SB23.36804 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6 | |
| Mailing Address 1960 Wilson Blvd | | Amount of Each Disbursement this Period 3000.00 | |
| City Arlington | State VA Zip Code 22216 | | |
| Purpose of Disbursement Contribution to Federal Candidate | | | Category/ Type |
| Candidate Name Mr James H Webb, Jr | | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: VA District: 00 | | | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 5000.00 |
| 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 103 / 118

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Jon Tester for U.S. Senate | | Transaction ID: SB23.36770 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 6 |
| Mailing Address P.O. Box 1135 | | Amount of Each Disbursement this Period 5000.00 |
| City Helena State MT Zip Code 59624 | 011 Category/ Type | |
| Purpose of Disbursement Contribution to Federal Candidate | | |
| Candidate Name Jon Tester | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Maine Democratic State Committee | | Transaction ID: SB23.36551 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6 |
| Mailing Address P.O. Box 5258 16 Winthrop St. | | Amount of Each Disbursement this Period 400.00 |
| City Augusta State ME Zip Code 04330 | 011 Category/ Type | |
| Purpose of Disbursement Contribution to State Party | | |
| Candidate Name Maine Democratic State Committee | | |
| 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) ▼ | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Massa for Congress | | Transaction ID: SB23.36802 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6 |
| Mailing Address 60 East Market St Suite 244 | | Amount of Each Disbursement this Period 800.00 |
| City Corning State NY Zip Code 14830 | Category/ Type | |
| Purpose of Disbursement Contribution to Federal Candidate | | |
| Candidate Name Eric Massa | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29 | Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 6200.00 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. McNerney for Congress | | Transaction ID: SB23.36796 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6 |
| Mailing Address 5429 Madison Avenue | | Amount of Each Disbursement this Period 5000.00 |
| City Sacramento State CA Zip Code 95841 | Category/ Type 011 | |
| Purpose of Disbursement Contribution to Federal Candidate | | |
| 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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Melissa Bean for Congress | | Transaction ID: SB23.36585 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6 |
| Mailing Address PO Box 3068 | | Amount of Each Disbursement this Period 2000.00 |
| City Barrington State IL Zip Code 60010 | Category/ Type 011 | |
| Purpose of Disbursement Contribution to Federal Candidate | | |
| Candidate Name Melissa Bean | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Michigan Democratic State Central Comm | | Transaction ID: SB23.36538 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6 |
| Mailing Address 606 Townsend | | Amount of Each Disbursement this Period 4000.00 |
| City Lansing State MI Zip Code 48933 | Category/ Type 011 | |
| Purpose of Disbursement Contribution to State Party | | |
| Candidate Name Michigan Democratic State Central Comm | | |
| 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) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 11000.00 |
| 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 105 / 118

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)
Progressive Patriots Fund

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Nelson for US Senate | | Transaction ID: SB23.36793 Date of Disbursement 06 / 19 / 2006 |
| Mailing Address PO Box 8666 | | Amount of Each Disbursement this Period 2000.00 |
| City Omaha State NE Zip Code 68108 | 011 Category/ Type | |
| Purpose of Disbursement Contribution to Federal Candidate Candidate Name E Benjamin Nelson | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Pederson 2006 | | Transaction ID: SB23.36769 Date of Disbursement 06 / 01 / 2006 |
| Mailing Address PO Box 34144 | | Amount of Each Disbursement this Period 4000.00 |
| City Phoenix State AZ Zip Code 85067 | 011 Category/ Type | |
| Purpose of Disbursement Contribution to Federal Candidate Candidate Name Jim Pederson | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: | Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Rhode Island Democratic State Committe | | Transaction ID: SB23.36555 Date of Disbursement 06 / 26 / 2006 |
| Mailing Address P.O. Box 6004 | | Amount of Each Disbursement this Period 600.00 |
| City Providence State RI Zip Code 02940 | 011 Category/ Type | |
| Purpose of Disbursement Contribution to State Party Candidate Name Rhode Island Democratic State Committe | | |
| 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) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 6600.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) A. Stabenow for US Senate | | Transaction ID: SB23.36592 | |
| Mailing Address PO Box 4945 | | Date of Disbursement 06 / 29 / 2006 | |
| City East Lansing | State MI | Zip Code 48826 | Amount of Each Disbursement this Period 1000.00 |
| Purpose of Disbursement Contribution to Federal Candidate | | 011 Category/ Type | |
| Candidate Name Debbie Stabenow | | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: MI | District: | | |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) B. Zack Space for Congress | | Transaction ID: SB23.36590 | |
| Mailing Address 714 N Wooster Avenue | | Date of Disbursement 06 / 28 / 2006 | |
| City Dover | State OH | Zip Code 44622 | Amount of Each Disbursement this Period 3000.00 |
| Purpose of Disbursement Contribution to Federal Candidate | | 011 Category/ Type | |
| Candidate Name Zack Space | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: OH | District: 18 | | |

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| SUBTOTAL of Disbursements This Page (optional) | 4000.00 |
| TOTAL This Period (last page this line number only) | 49100.00 |

**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 107 / 118

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

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

| | | |
|---|----------|--|
| Full Name (Last, First, Middle Initial) A. Angelides 2006 | | Transaction ID: SB29.36575 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6 |
| Mailing Address 1331 21st Street | | Amount of Each Disbursement this Period 5000.00 |
| City Sacramento | State CA | |
| Zip Code 95814 | | |
| Purpose of Disbursement Contribution to State Campaign Committee Candidate Name Phil Angelides | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: | | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|----------|--|
| Full Name (Last, First, Middle Initial) B. Appel for Senate | | Transaction ID: SB29.36779 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 6 |
| Mailing Address 10901 180th Ave | | Amount of Each Disbursement this Period 400.00 |
| City Ackworth | State IA | |
| Zip Code 50001 | | |
| Purpose of Disbursement Contribution to State Campaign Committee Candidate Name Staci Appel | | |
| 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) ▼ |

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|---|----------|--|
| Full Name (Last, First, Middle Initial) C. Chet Culver Committee | | Transaction ID: SB29.36773 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 6 |
| Mailing Address P.O. Box 6068 | | Amount of Each Disbursement this Period 2500.00 |
| City Des Moines | State IA | |
| Zip Code 50309 | | |
| Purpose of Disbursement Contribution to State Campaign Committee Candidate Name Chet Culver | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: | | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 7900.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Chet Culver Committee | | Transaction ID: SB29.36545 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6 |
| Mailing Address P.O. Box 6068 | | Amount of Each Disbursement this Period 2000.00 |
| City Des Moines State IA Zip Code 50309 | Purpose of Disbursement Contribution to State Campaign Committee Candidate Name Chet Culver Category/Type 011 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Citizens for Johnson | | Transaction ID: SB29.36785 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 6 |
| Mailing Address 216 SW Logan St. | | Amount of Each Disbursement this Period 200.00 |
| City Ankeny State IA Zip Code 50023 | Purpose of Disbursement Contribution to State Campaign Committee Candidate Name Merle Johnson Category/Type | |
| 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) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Citizens for Rob Hogg | | Transaction ID: SB29.36782 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 6 |
| Mailing Address 2750 Otis Road SE | | Amount of Each Disbursement this Period 300.00 |
| City Cedar Rapids State IA Zip Code 52403 | Purpose of Disbursement Contribution to State Campaign Committee Candidate Name Rob Hogg Category/Type | |
| 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) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 2500.00 |
| 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 109 / 118

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

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Committee to Re-Elect Governor Baldacci | | Transaction ID: SB29.36549 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6 |
| Mailing Address P.O. Box 786 | | Amount of Each Disbursement this Period 500.00 |
| City Augusta State ME Zip Code 04332 | 011 Category/ Type | |
| Purpose of Disbursement Contribution to State Campaign Committee | | |
| Candidate Name John Baldacci | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Heckroth for Senate | | Transaction ID: SB29.36790 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 6 |
| Mailing Address 416 West Bremer St. | | Amount of Each Disbursement this Period 100.00 |
| City Waverly State IA Zip Code 50677 | 011 Category/ Type | |
| Purpose of Disbursement Contribution to State Campaign Committee | | |
| Candidate Name Bill Heckroth | | |
| 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) ▼ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Kulongoski for Governor | | Transaction ID: SB29.36553 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6 |
| Mailing Address P.O. Box 399 | | Amount of Each Disbursement this Period 800.00 |
| City Portland State OR Zip Code 97207 | 011 Category/ Type | |
| Purpose of Disbursement Contribution to State Campaign Committee | | |
| Candidate Name Ted Kulongoski | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 1400.00 |
| 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 110 / 118

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

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Lucy Baxley for Governor | | Transaction ID: SB29.36738 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 6 |
| Mailing Address P.O. Box 201085 | | Amount of Each Disbursement this Period 1000.00 |
| City Montgomery State AL Zip Code 36120 | 011 Category/ Type | |
| Purpose of Disbursement Contribution to State Campaign Committee | | |
| Candidate Name Lucy Baxley | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Lucy Baxley for Governor | | Transaction ID: SB29.36559 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6 |
| Mailing Address P.O. Box 201085 | | Amount of Each Disbursement this Period 700.00 |
| City Montgomery State AL Zip Code 36120 | 011 Category/ Type | |
| Purpose of Disbursement Contribution to State Campaign Committee | | |
| Candidate Name Lucy Baxley | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Olive for Senate | | Transaction ID: SB29.39890 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 6 |
| Mailing Address Box 274 | | Amount of Each Disbursement this Period 5000.00 |
| City Story City State IA Zip Code 50248 | Category/ Type | |
| Purpose of Disbursement Contribution to State Campaign Committee | | |
| 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) ▼ | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 6700.00 |
| 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 111 / 118

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

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NAME OF COMMITTEE (In Full)
Progressive Patriots Fund

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) A. Schmitz for Senate | | Transaction ID: SB29.36776 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 6 | |
| Mailing Address 408 1/2 West Hempstead | | Amount of Each Disbursement this Period 500.00 | |
| City Fairfield State IA Zip Code 52556 | 011 Category/ Type | | |
| Purpose of Disbursement Contribution to State Campaign Committee | | | |
| Candidate Name Becky Schmitz | | | |
| 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) ▼ | | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) B. Strickland for Governor | | Transaction ID: SB29.36547 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6 | |
| Mailing Address 42 Park Drive | | Amount of Each Disbursement this Period 1000.00 | |
| City Columbus State OH Zip Code 43209 | 011 Category/ Type | | |
| Purpose of Disbursement Contribution to State Campaign Committee | | | |
| Candidate Name Ted Strickland | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

SUBTOTAL of Disbursements This Page (optional) ►

1500.00

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

20000.00

Image# 26960559045

Form/Schedule: **SA11A1** This contribution includes unitemized earmarked contributions from Michelle Elliott for \$5, Michele Rivera for \$10, and Mary Perdue for \$20.
Transaction ID: **SA11A1.39682**

Form/Schedule: **SA11A1** This contribution includes an unitemized earmarked contribution from from Amanda Greene for \$25.
Transaction ID: **SA11A1.39687**

Image# 26960559046

Form/Schedule: SA11A1 This contribution includes unitemized earmarked contributions from Janice Dewey for \$5 and Colin Maroney for \$5.88.
Transaction ID: SA11A1.39690

Form/Schedule: SA11A1 This contribution includes unitemized earmarked contributions from Markus Roberts for \$25 and Joan Mason for \$20.
Transaction ID: SA11A1.39693

Image# 26960559047

Form/Schedule: **SA11A1** This contribution includes unitemized earmarked contributions from Christopher Walker for \$25, Gerald Troiano for \$25, Michelle Elliott for \$5, Roger Wilcox for \$15, and Judy Berning for \$25.
Transaction ID: **SA11A1.39696**

Form/Schedule: **SB21B** All disbursements documented as Line 21b, Federal Operating Expenditures, are in support of the committee itself and did not serve as contributions to any other candidate, federal or non-federal.
Transaction ID: **SB21B.36795**

Image# 26960559048

Form/Schedule: **SB21B** This disbursement includes \$216.40 in unitemized expenses including \$92.13 to Thunder Grill for food and beverage, \$42.11 to Walter's Cafe for food and beverage, and \$82.16 to Senator Restaurant for food and beverage.
Transaction ID: **SB21B.36811**

Form/Schedule: **SB21B** This disbursement is an unitemized expense for \$51.47 to Citgo for gas.
Transaction ID: **SB21B.36807**

Image# 26960559049

Form/Schedule: **SB21B** This disbursement includes \$89.75 in unitemized expenses including \$9.75 in highway tolls, \$40 for taxi service and \$40 for event tickets.
Transaction ID: **SB21B.36621**

Form/Schedule: **SB21B** This disbursement includes \$59.03 in unitemized expenses including \$4.33 to HMS Host for food and beverage, \$7-54 to Cheesesteak Etc for food and beverage, \$7.16 to Subway for food and beverage, \$13 in tips and \$27 for taxi fares.
Transaction ID: **SB21B.36596**

Form/Schedule: **SB21B** This disbursement includes \$1,170.85 in unitemized expenses including \$78.34 to Joe's Crab Shack for food and beverage, \$120.28 to Magnolia Hotel for lodging, \$3 to Smarte Carte for cart rental, \$10.74 to Cafe Caffeine for beverages, \$15.76 to HMS Host for food and beverage, \$62 to Metro Wash Airport for parking, \$108.61 to La Scala Restaurant for food and beverage, \$52 to Taxi Taxi for taxi fares, \$103.44 to Hotel Oceana for food and beverage, \$38 to Taxi Taxi for taxi fare, \$47.91 to Orbitz for reservation fees, \$85.45 to Uline for office supplies, \$35 to Expedia for reservation fees, \$9.74 to Primo Cappuccino for beverages, \$62.02 to Mark Hotel for food and beverage, \$114.63 to Loews Regency Hotel for food and beverage, \$86 to LA Taxi for taxi fares, \$3-8.20 to Shutters Lobby Service for food and beverage, \$4.61 to HMS Host for food and beverage, and \$95.12 to Anton's for food and beverage.

Form/Schedule: **SB21B** This disbursement includes \$125.96 in unitemized expenses including \$12.96 for food and beverages, \$96 in taxi fares, and \$17 in tips.

Transaction ID: **SB21B.39879**

Image# 26960559051

Form/Schedule: **SB21B** This disbursement includes \$326.49 in unitemized expenses including \$25 to Frontier Communication for phone ex-
Transaction ID: **SB21B.36755** penses, \$25 to MCI for phone expenses, \$120 to Nextel for cell phone expenses, \$21 to the Paradies Shop for fo-
od and beverage, \$21.10 for disposable cameras, \$33.08 for food and beverage, \$51.31 to Citgo for gas, and \$30
to General Mitchell Airport for parking.

Form/Schedule: **SB21B** This disbursement includes \$128.35 in unitemized expenses including \$8.21 to Billy Goat Tavern for food and be-
Transaction ID: **SB21B.36839** verage, \$7 to McDonalds for food and beverage, \$13.61 to Johnny Rockets for food and beverage, \$22.53 to Prick-
ly Pear for food and beverage, and \$77 in taxi fares.
