

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) EMILY's List	FEC IDENTIFICATION NUMBER C C00193433
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Mission Control Inc

Date
M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 6

Mailing Address
201 Adams Street

Amount
28122.00

City State Zip Code
Manchester CT 06042

Transaction ID: SE24-105901

Purpose of Expenditure
Printing

Office Sought: House State: LA
 Senate District: 2
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Karen Carter

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
118602.79

Disbursement For: Primary General 2006
 Other (specify) : Runoff

Full Name (Last, First, Middle, Initial) of Payee
Mission Control Inc

Date
M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 6

Mailing Address
201 Adams Street

Amount
12725.99

City State Zip Code
Manchester CT 06042

Transaction ID: SE24-105902

Purpose of Expenditure
Postage

Office Sought: House State: LA
 Senate District: 2
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Karen Carter

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
118602.79

Disbursement For: Primary General 2006
 Other (specify) : Runoff

(a) SUBTOTAL of Itemized Independent Expenditures	40847.99
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	64014.97

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Caroline Fines
Signature

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