

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee	FEC IDENTIFICATION NUMBER C C0000935
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
MSHC Partners Inc.

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

Mailing Address
1155 15th St NW Suite 300

Amount
5005.76

City State Zip Code
Washington DC 20005

Transaction ID: SE-852826

Purpose of Expenditure
Mail Services

Category/
Type 006

Office Sought: House State: MD
 Senate District: 01
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Frank Kratovil

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 892308.26

Disbursement For: Primary General
 Other (specify) : _____
2008

Date of Dissemination 10/10/08

Full Name (Last, First, Middle, Initial) of Payee
MSHC Partners Inc.

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

Mailing Address
1155 15th St NW Suite 300

Amount
5005.75

City State Zip Code
Washington DC 20005

Transaction ID: SE-852827

Purpose of Expenditure
Mail Services

Category/
Type 006

Office Sought: House State: MD
 Senate District: 01
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Andrew P Harris

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 892308.26

Disbursement For: Primary General
 Other (specify) : _____
2008

Date of Dissemination 10/10/08

(a) SUBTOTAL of Itemized Independent Expenditures	10011.51
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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.

Brian L. Wolff
Signature

Date M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8