

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

Forward Together PAC

ADDRESS (number and street) 201 North Union Street Suite 300 Alexandria VA 22314

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00412791

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
July 15 Quarterly Report(Q2)
October 15 Quarterly Report(Q3)
January 31 Quarterly Report(YE)
July 31 Mid-Year Report(Non-election Year Only) (MY)
Termination Report (TER)

- (b) Monthly Report Due On: Feb 20 (M2), May 20 (M5), Aug 20 (M8), Nov 20 (M11) (Non-Election Year Only), Mar 20 (M3), Jun 20 (M6), Sep 20 (M9), Dec 20 (M12) (Non-Election Year Only), Apr 20 (M4), Jul 20 (M7), Oct 20 (M10), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12G)

Election on in the State of

- (d) 30-Day Post -Election Report for the: General (30G), Runoff (30R), Special (30S)

Election on in the State of

5. Covering Period 04 01 2009 through 04 30 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Honorable Gerald S McGowan

Signature of Treasurer Electronically Filed by Honorable Gerald S McGowan Date 05 11 2009

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

Table with 10 columns and 1 row, containing 'Office Use Only' in the first column.

FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Forward Together PAC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" 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>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		306788.06
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	245606.51									
(c) Total Receipts (from Line 19)	46149.24	75231.97								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	291755.75	382020.03								
7. Total Disbursements (from Line 31)	31299.48	121563.76								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	260456.27	260456.27								
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
Forward Together PAC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	30500.00	53457.88
(i) Itemized (use Schedule A)	50.00	275.00
(ii) Unitemized	30550.00	53732.88
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	15500.00	21000.00
(c) Other Political Committees (such as PACs)	46050.00	74732.88
(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	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	99.24	499.09
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))	46149.24	75231.97
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	46149.24	75231.97

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	31299.48	79063.76
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	31299.48	79063.76
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	37500.00
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	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	5000.00
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))..	31299.48	121563.76
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	31299.48	121563.76

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	46050.00	74732.88
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	46050.00	74732.88
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	31299.48	79063.76
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	31299.48	79063.76

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 27

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Forward Together PAC

A.

Full Name (Last, First, Middle Initial)
Mark Alan Aronchick

Mailing Address 1116 Penshurst Ln

City State Zip Code
Penn Valley PA 19072-1226

FEC ID number of contributing federal political committee. C

Name of Employer
Hangley Aronchick

Occupation
Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 03 / 2009

Transaction ID: C2054920

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Sue Ann Berlin

Mailing Address 7106 Arrowood Rd

City State Zip Code
Bethesda MD 20817-2809

FEC ID number of contributing federal political committee. C

Name of Employer
Self Employed

Occupation
Interior Designer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 03 / 2009

Transaction ID: C2054923

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
Brien Biondi

Mailing Address 833 S Lee St

City State Zip Code
Alexandria VA 22314-4333

FEC ID number of contributing federal political committee. C

Name of Employer
Chief Executives Organization

Occupation
Executive Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 03 / 2009

Transaction ID: C2054925

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) 3000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 27
	<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)
Forward Together PAC

A.

Full Name (Last, First, Middle Initial) Paul E. Carothers		Date of Receipt MM / DD / YYYY 04 / 27 / 2009
Mailing Address 2548 North Ridgeview Road		Transaction ID: C2058517
City Arlington	State VA	Zip Code 22207-5113
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer YUM! Brands, Inc.	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.

Full Name (Last, First, Middle Initial) Steve Cloobek		Date of Receipt MM / DD / YYYY 04 / 15 / 2009
Mailing Address Polo Towers 3745 Las Vegas Boulevard South		Transaction ID: C2056911
City Las Vegas	State NV	Zip Code 89109-4308
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Diamonds Resort International	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C.

Full Name (Last, First, Middle Initial) William C. Eacho, III		Date of Receipt MM / DD / YYYY 04 / 15 / 2009
Mailing Address 6223 Kennedy Dr		Transaction ID: C2056910
City Chevy Chase	State MD	Zip Code 20815-6507
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Carlton Capital Group, LLC	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	6500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 27
(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)
Forward Together PAC

A.

Full Name (Last, First, Middle Initial)
Kimberly Elliott

Mailing Address 8506 Country Club Dr

City State Zip Code
Bethesda MD 20817-4581

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

Name of Employer Trust for America's Health Occupation Deputy Director, Public Health

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

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

Transaction ID: C2054914

Amount of Each Receipt this Period
2500.00

B.

Full Name (Last, First, Middle Initial)
Victor Fazio

Mailing Address 1333 New Hampshire Ave NW

City State Zip Code
Washington DC 20036-1500

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

Name of Employer Akin Gump Strauss Hauer & Feld, LLP Occupation Senior Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: C2058516

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
Morton Fungler

Mailing Address 1650 Tysons Blvd STE 820

City State Zip Code
McLean VA 22102-4825

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

Name of Employer Condur Company Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

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

Transaction ID: C2054924

Amount of Each Receipt this Period
2500.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 27
(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)
Forward Together PAC

A.

Full Name (Last, First, Middle Initial) Elizabeth R. Geise		Date of Receipt <table border="1" style="font-size: small; text-align: center;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		2	2		2	0	0	9													
Mailing Address 4021 Glenrose St		Transaction ID: C2057871																				
City Kensington	State MD	Zip Code 20895-3716																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"><tr><td>1000.00</td></tr></table>	1000.00																			
1000.00																						
Name of Employer Goodwin Proctor	Occupation Attorney																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td>1000.00</td></tr></table>	1000.00																				
1000.00																						

B.

Full Name (Last, First, Middle Initial) Michael F. Goldman		Date of Receipt <table border="1" style="font-size: small; text-align: center;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		0	3		2	0	0	9													
Mailing Address 1101 30th St NW		Transaction ID: C2054915																				
City Washington	State DC	Zip Code 20007-3708																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"><tr><td>500.00</td></tr></table>	500.00																			
500.00																						
Name of Employer Silverberg Goldman & Birk-off, LLP	Occupation Attorney																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td>500.00</td></tr></table>	500.00																				
500.00																						

C.

Full Name (Last, First, Middle Initial) Joanne T. Hannett		Date of Receipt <table border="1" style="font-size: small; text-align: center;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		0	3		2	0	0	9													
Mailing Address 4949 Rock Spring Rd		Transaction ID: C2054921																				
City Arlington	State VA	Zip Code 22207-2705																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"><tr><td>1000.00</td></tr></table>	1000.00																			
1000.00																						
Name of Employer The Capitol Alliance	Occupation CFO																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td>1000.00</td></tr></table>	1000.00																				
1000.00																						

SUBTOTAL of Receipts This Page (optional)	<table border="1" style="width: 100%;"><tr><td>2500.00</td></tr></table>	2500.00
2500.00		
TOTAL This Period (last page this line number only)	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>	

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

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

FOR LINE NUMBER: PAGE 10 / 27
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Forward Together PAC

A. Full Name (Last, First, Middle Initial)
Sheldon J. Harris

Mailing Address 500 Independence Ave SE

City Washington State DC Zip Code 20003-1143

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

Name of Employer The Harris Firm Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 15 / 2009
Transaction ID: C2056916
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Reed E. Hundt

Mailing Address 6416 Brookside Dr

City Chevy Chase State MD Zip Code 20815-6649

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

Name of Employer McKinsey & Company, Inc. Occupation Snr Advisor Information Industries

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 03 / 2009
Transaction ID: C2054922
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Ulice Payne, Jr.

Mailing Address 3534 S 122nd Ct

City Milwaukee State WI Zip Code 53228-1029

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

Name of Employer Addison-Clifton, LLC Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 22 / 2009
Transaction ID: C2057874
Amount of Each Receipt this Period 1000.00

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)
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)
Forward Together PAC

A. Full Name (Last, First, Middle Initial)
Steven M. Rales

Mailing Address 2099 Pennsylvania Ave NW
FI 12

City State Zip Code
Washington DC 20006-6807

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

Name of Employer Occupation
Danaher Chairman

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: C2056913

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Adam R. Rose

Mailing Address PO Box 657

City State Zip Code
Cross River NY 10518-0657

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

Name of Employer Occupation
Rose Associates, Inc. Real Estate

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

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

Transaction ID: C2058513

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Daniel H. Squire

Mailing Address 1717 21st St NW

City State Zip Code
Washington DC 20009-1101

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

Name of Employer Occupation
Wilmer, Cutler Attorney

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: C2056915

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **8500.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 27
	(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)
Forward Together PAC

A.

Full Name (Last, First, Middle Initial) Patricia Anne Van Scoyoc		Date of Receipt MM / DD / YYYY 04 / 27 / 2009
Mailing Address 131 Yarnick Rd		Transaction ID: C2058520
City Great Falls	State VA	Zip Code 22066-3525
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Weichert Realtors	Occupation Real Estate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.

Full Name (Last, First, Middle Initial) David C. Wajsgas		Date of Receipt MM / DD / YYYY 04 / 03 / 2009
Mailing Address 2464 Heronwood Dr		Transaction ID: C2054918
City Bloomfield Hills	State MI	Zip Code 48302-0836
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Raytheon Company	Occupation Snr. Vice President/CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	30500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 27
(check only one)

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

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NAME OF COMMITTEE (In Full)
Forward Together PAC

A.

Full Name (Last, First, Middle Initial)
Bingham McCutchen, LLP PAC

Mailing Address 2020 K St NW

City State Zip Code
Washington DC 20006-1817

FEC ID number of contributing federal political committee. **C** C00165621

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

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

Transaction ID: C2057872

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
BWX Technologies Inc. PAC

Mailing Address 2016 Mount Athos Rd

City State Zip Code
Lynchburg VA 24504-5447

FEC ID number of contributing federal political committee. **C** C00365502

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: C2056912

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
CareFirst BlueCross BlueShield Assoc Federal PAC

Mailing Address 10455 Mill Run Cir

City State Zip Code
Owings Mills MD 21117-4208

FEC ID number of contributing federal political committee. **C** C00286922

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

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

Transaction ID: C2059012

Amount of Each Receipt this Period
1000.00

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 27
(check only one)

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

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NAME OF COMMITTEE (In Full)
Forward Together PAC

A. Full Name (Last, First, Middle Initial)
Darden Restaurants, Inc. Employees Good Govt Fund

Mailing Address 5900 Lake Ellenor Dr

City State Zip Code
Orlando FL 32809-4634

FEC ID number of contributing federal political committee. **C** C00108282

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

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

Transaction ID: C2058511

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Fleishman - Hillard PAC

Mailing Address 200 N Broadway

City State Zip Code
Saint Louis MO 63102-2730

FEC ID number of contributing federal political committee. **C** C00200659

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

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

Transaction ID: C2058519

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Fresenius Medical Care North America PAC

Mailing Address 801 Pennsylvania Ave NW
Ste 255

City State Zip Code
Washington DC 20004-3637

FEC ID number of contributing federal political committee. **C** C00401299

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

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

Transaction ID: C2058518

Amount of Each Receipt this Period
2000.00

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)
for each category of the
Detailed Summary Page

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

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

NAME OF COMMITTEE (In Full)
Forward Together PAC

A. Full Name (Last, First, Middle Initial)
Microsoft Corporation Political Action Committee
 Mailing Address 16011 NE 36th Way
 City State Zip Code
 Redmond WA 98052-6301
 FEC ID number of contributing federal political committee. **C** C00227546
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00
 Date of Receipt: M M / D D / Y Y Y Y Y
 0 4 / 2 8 / 2 0 0 9
Transaction ID: C2058851
 Amount of Each Receipt this Period 2500.00

B. Full Name (Last, First, Middle Initial)
Sodexo, Inc. PAC
 Mailing Address 9801 Washingtonian Blvd
 FI 12
 City State Zip Code
 Gaithersburg MD 20878-7373
 FEC ID number of contributing federal political committee. **C** C00361014
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00
 Date of Receipt: M M / D D / Y Y Y Y Y
 0 4 / 2 7 / 2 0 0 9
Transaction ID: C2058515
 Amount of Each Receipt this Period 2000.00

C. Full Name (Last, First, Middle Initial)
Step toe & Johnson LLP Political Action Committee
 Mailing Address 1330 Connecticut Ave NW
 City State Zip Code
 Washington DC 20036-1704
 FEC ID number of contributing federal political committee. **C** C00431858
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00
 Date of Receipt: M M / D D / Y Y Y Y Y
 0 4 / 1 5 / 2 0 0 9
Transaction ID: C2056914
 Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 5500.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

NAME OF COMMITTEE (In Full)
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) UNUM Group PAC (UNUMPAC)		Date of Receipt																					
	Mailing Address 2211 Congress St		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	3		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	4		0	3		2	0	0	9														
	City State Zip Code Portland ME 04122-0002		Transaction ID: C2054916																					
FEC ID number of contributing federal political committee. C C00177436		Amount of Each Receipt this Period 1000.00																						
Name of Employer Occupation		Aggregate Year-to-Date ▼ 1000.00																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	15500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 17 / 27	
	(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)
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) Wachovia, NA		Date of Receipt
	Mailing Address 301 N Washington St		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Alexandria	VA	22314-2501
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="499.09"/>	Transaction ID: C2059726 Amount of Each Receipt this Period <input type="text" value="99.24"/> * Interest

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="99.24"/>
TOTAL This Period (last page this line number only)	<input type="text" value="99.24"/>

**SCHEDULE 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 18 / 27

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

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

NAME OF COMMITTEE (In Full)
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: D157783 Date of Disbursement
	Mailing Address 5800 Windward Pkwy	<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City Alpharetta State GA Zip Code 30005-8802	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Service Charge Candidate Name	<input type="text" value="99.99"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: D157784 Date of Disbursement
	Mailing Address 5800 Windward Pkwy	<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City Alpharetta State GA Zip Code 30005-8802	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes Candidate Name	<input type="text" value="282.59"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: D159514 Date of Disbursement
	Mailing Address 5800 Windward Pkwy	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Alpharetta State GA Zip Code 30005-8802	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Service Charge Candidate Name	<input type="text" value="93.85"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="476.43"/>
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 19 / 27

<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)
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: D159515 Date of Disbursement
	Mailing Address 5800 Windward Pkwy	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Alpharetta State GA Zip Code 30005-8802	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes Candidate Name	<input type="text" value="282.59"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: D159703 Date of Disbursement
	Mailing Address 5800 Windward Pkwy	<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City Alpharetta State GA Zip Code 30005-8802	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Service Charge Candidate Name	<input type="text" value="107.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Campaign Finance Consultants	Transaction ID: D158930 Date of Disbursement
	Mailing Address 10 G St NE Ste 470	<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20002-8038	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Consulting Services Candidate Name	<input type="text" value="2072.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="003"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2461.59"/>
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 20 / 27

<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)
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) Columbia Capital, LLC Mailing Address 201 N Union St STE 300 City Alexandria State VA Zip Code 22314-2650 Purpose of Disbursement 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: D146274 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 9	Amount of Each Disbursement this Period 643.36
B.	Full Name (Last, First, Middle Initial) Credit Union House Mailing Address 403 C St NE City Washington State DC Zip Code 20002-5817 Purpose of Disbursement Catering/Events 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: D157930 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 9	Amount of Each Disbursement this Period 400.00
C.	Full Name (Last, First, Middle Initial) Monica Dixon Mailing Address 5113 Duvall Dr City Bethesda State MD Zip Code 20816-1877 Purpose of Disbursement Political Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D159517 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9	Amount of Each Disbursement this Period 3500.00

SUBTOTAL of Disbursements This Page (optional) ▶

4543.36

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 21 / 27

<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)
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) Federal City Caterers	Transaction ID: D158931 Date of Disbursement
	Mailing Address 1119 12th St NW	<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20005-4632	Amount of Each Disbursement this Period
	Purpose of Disbursement Catering/Events Candidate Name	<input type="text" value="1966.30"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<input type="text" value="003"/> Category/Type

B.	Full Name (Last, First, Middle Initial) H&W Printing	Transaction ID: D157477 Date of Disbursement
	Mailing Address 3616 Oak Ln	<input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City Mount Rainier State MD Zip Code 20712-2128	Amount of Each Disbursement this Period
	Purpose of Disbursement Printing Candidate Name	<input type="text" value="1004.42"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<input type="text" value="003"/> Category/Type

C.	Full Name (Last, First, Middle Initial) Katherine Buchanan	Transaction ID: D158868 Date of Disbursement
	Mailing Address 102 Lake Cook Dr	<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City Alexandria State VA Zip Code 22304-6451	Amount of Each Disbursement this Period
	Purpose of Disbursement Accounting/Compliance Services Candidate Name	<input type="text" value="2625.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<input type="text" value="001"/> Category/Type

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5595.72"/>
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)

<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)
Forward Together PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) LexisNexis</p> <p>Mailing Address PO Box 72477090</p> <p>City Philadelphia State PA Zip Code 19170-0001</p> <p>Purpose of Disbursement Internet Research Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D158869</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="112.50"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew Collins Smith</p> <p>Mailing Address 1305 Riggs St NW</p> <p>City Washington State DC Zip Code 20009-4324</p> <p>Purpose of Disbursement Salary</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>Transaction ID: D157785</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="735.82"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mr. Andrew Collins Smith</p> <p>Mailing Address 1305 Riggs St NW</p> <p>City Washington State DC Zip Code 20009-4324</p> <p>Purpose of Disbursement Salary</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>Transaction ID: D159518</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="735.82"/></p> <p>Category/Type: <input type="text" value="001"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1584.14"/>
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)

<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)
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) Ms. Angelique R. Cannon	Transaction ID: D159516 Date of Disbursement
	Mailing Address 7209 Flower Tuft Ct	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Springfield State VA Zip Code 22153-1508	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Consulting Services	<input type="text" value="6375.00"/>
	Candidate Name	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PingTone Communications	Transaction ID: D157669 Date of Disbursement
	Mailing Address 13921 Park Center Rd 1st Floor	<input type="text" value="04"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>
	City Herndon State VA Zip Code 20171-3236	Amount of Each Disbursement this Period
	Purpose of Disbursement Telephone	<input type="text" value="253.48"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PingTone Communications	Transaction ID: D157304 Date of Disbursement
	Mailing Address 13921 Park Center Rd 1st Floor	<input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City Herndon State VA Zip Code 20171-3236	Amount of Each Disbursement this Period
	Purpose of Disbursement Internet Service	<input type="text" value="66.30"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) Wachovia, NA	Transaction ID: D159704 Date of Disbursement																			
	Mailing Address 301 N Washington St	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	1		2	0	0	9												
	City Alexandria State VA Zip Code 22314-2501	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Credit Card Fees	<table border="1"><tr><td>136.83</td></tr></table>	136.83																		
136.83																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) Wachovia, NA	Transaction ID: D159705 Date of Disbursement																			
	Mailing Address 301 N Washington St	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	9		2	0	0	9												
	City Alexandria State VA Zip Code 22314-2501	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Commercial Service Charge	<table border="1"><tr><td>121.33</td></tr></table>	121.33																		
121.33																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: D158871 Date of Disbursement																			
	Mailing Address PO Box 1270	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	7		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	7		2	0	0	9												
	City Newark State NJ Zip Code 07101-1270	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Credit Card Payment	<table border="1"><tr><td>2286.79</td></tr></table>	2286.79																		
2286.79																					
	Candidate Name	<table border="1"><tr><td></td></tr></table> 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)	<table border="1"><tr><td>2544.95</td></tr></table>	2544.95
2544.95		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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

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

FOR LINE NUMBER: (check only one)

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<input 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)
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) Elite Global Chauffeur	Transaction ID: D158873 Date of Disbursement 04 / 03 / 2009
	Mailing Address 9920 Watson Rd Fairway Square	Amount of Each Disbursement this Period 1463.74
	City Saint Louis State MO Zip Code 63126-1834	
	Purpose of Disbursement Transportation Services Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Gramercy Park Hotel	Transaction ID: D158872 Date of Disbursement 04 / 01 / 2009
	Mailing Address 2 Lexington Ave	Amount of Each Disbursement this Period 823.05
	City New York State NY Zip Code 10010-5405	
	Purpose of Disbursement Travel/Lodging Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: D159498 Date of Disbursement 04 / 27 / 2009
	Mailing Address PO Box 1270	Amount of Each Disbursement this Period 7333.54
	City Newark State NJ Zip Code 07101-1270	
	Purpose of Disbursement Credit Card Payment 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)	7333.54
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 26 / 27

<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)
Forward Together PAC

A.	Full Name (Last, First, Middle Initial) ANobleworld S3, Inc.	Transaction ID: D159502 Date of Disbursement 04 / 24 / 2009
	Mailing Address 201 N Union St Ste 300	Amount of Each Disbursement this Period 484.94
	City Alexandria State VA Zip Code 22314-2650	
	Purpose of Disbursement Computer Services Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Marcel Hotel	Transaction ID: D159503 Date of Disbursement 04 / 24 / 2009
	Mailing Address 201 E 24th St	Amount of Each Disbursement this Period 219.43
	City New York State NY Zip Code 10010-3801	
	Purpose of Disbursement Travel/Lodging Candidate Name	002 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: D159499 Date of Disbursement 04 / 24 / 2009
	Mailing Address 3301 Jefferson Davis Hwy	Amount of Each Disbursement this Period 308.47
	City Alexandria State VA Zip Code 22305-3044	
	Purpose of Disbursement Office Supplies Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

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)
Forward Together PAC

<p>A. Full Name (Last, First, Middle Initial) The Carlyle Hotel</p> <p>Mailing Address 35 E 76th St</p> <p>City New York State NY Zip Code 10021-1827</p> <p>Purpose of Disbursement Catering/Events</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>Transaction ID: D159500</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5620.18"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) US Postmaster</p> <p>Mailing Address 1100 Wythe St</p> <p>City Alexandria State VA Zip Code 22314-1843</p> <p>Purpose of Disbursement Postage</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>Transaction ID: D159501</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="200.52"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Wired For Change</p> <p>Mailing Address 1700 Connecticut Ave NW</p> <p>City Washington State DC Zip Code 20009-1134</p> <p>Purpose of Disbursement Website Support</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>Transaction ID: D159504</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="31234.51"/>