

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For 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

Moran for Congress

ADDRESS (number and street) 311 North Washington Street

Check if different than previously reported. (ACC)  Suite 200L

Alexandria VA 22314

2. **FEC IDENTIFICATION NUMBER** C00241349

**CITY** **STATE** **ZIP CODE** **STATE** **DISTRICT**

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

VA 08

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 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)  General (12G)  Runoff (12R)

Convention (12C)  Special (12S)

Election on [ ] [ ] [ ] in the State of [ ]

(c) 30-Day **POST**-Election Report for the:

General (30G)  Runoff (30R)  Special (30S)

Election on [ ] [ ] [ ] in the State of [ ]

5. Covering Period 07 01 2009 through 09 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 Marvin F. Weissberg

Signature of Treasurer Electronically Filed by Marvin F. Weissberg Date 01 31 2010

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 3 (Revised 02/2003)

Write or Type Committee Name

Moran for Congress

Report Covering the Period:

From:    To:

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)).....	131980.00	400172.75
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	131980.00	400172.75
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	87040.92	350473.99
(b) Total Offsets to Operating Expenditures (from Line 14).....	2312.33	5359.52
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	84728.59	345114.47
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	<b>465547.87</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	

**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

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name  
Moran for Congress

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	9

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

61600.00

209250.00

(ii) Unitemized.....

380.00

2672.75

(iii) TOTAL of contributions

61980.00

211922.75

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

70000.00

188250.00

(c) Other Political Committees (such as PACS).....

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

131980.00

400172.75

(add Lines 11(a)(iii), (b), (c), and (d))

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

2312.33

5359.52

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

255.46

1830.41

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

134547.79

407362.68

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	87040.92	350473.99
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	19000.00	182000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	106040.92	532473.99

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	437041.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	134547.79
25. SUBTOTAL (add Line 23 and Line 24).....	571588.79
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	106040.92
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	465547.87

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 85  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
Moran for Congress

**A.** Full Name (Last, First, Middle Initial)  
Karen T. Adams  
Mailing Address PO Box 2121  
City Kensington State MD Zip Code 20891  
FEC ID number of contributing federal political committee. C  
Name of Employer NIH Occupation Health Project Manager  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
2400.00  
Date of Receipt M M / D D / Y Y Y Y  
0 9 / 0 1 / 2 0 0 9  
Transaction ID: C24791  
Amount of Each Receipt this Period  
2400.00

**B.** Full Name (Last, First, Middle Initial)  
Claire L. Adeams-Ender  
Mailing Address 3088 Woods Cove Lane  
City Woodbridge State VA Zip Code 22192-1136  
FEC ID number of contributing federal political committee. C  
Name of Employer n/a Occupation Retired  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
2500.00  
Date of Receipt M M / D D / Y Y Y Y  
0 9 / 1 8 / 2 0 0 9  
Transaction ID: C24798  
Amount of Each Receipt this Period  
2400.00

**C.** Full Name (Last, First, Middle Initial)  
Claire L. Adeams-Ender  
Mailing Address 3088 Woods Cove Lane  
City Woodbridge State VA Zip Code 22192-1136  
FEC ID number of contributing federal political committee. C  
Name of Employer n/a Occupation Retired  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
2500.00  
Date of Receipt M M / D D / Y Y Y Y  
0 9 / 1 8 / 2 0 0 9  
Transaction ID: C24799  
Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... 4900.00  
**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 85  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

**A.** Full Name (Last, First, Middle Initial)  
John M. Albertine  
Mailing Address 100 Federal Dr  
City Fredericksburg State VA Zip Code 22405-3102  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Albertine Enterprises Occupation Consultant  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00  
Date of Receipt MM / DD / YYYY  
09 / 30 / 2009  
**Transaction ID: C24837**  
Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Cristina Antelo  
Mailing Address 2312 First Street, NW  
City Washington State DC Zip Code 20001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Podesta Group Occupation Attorney  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 400.00  
Date of Receipt MM / DD / YYYY  
09 / 21 / 2009  
**Transaction ID: C24801**  
Amount of Each Receipt this Period 200.00

**C.** Full Name (Last, First, Middle Initial)  
Luis G. Armendariz  
Mailing Address 457 Telegraph Road  
City Stafford State VA Zip Code 22554-4842  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Sytech Occupation Engineer  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 3800.00  
Date of Receipt MM / DD / YYYY  
09 / 01 / 2009  
**Transaction ID: C24785**  
Amount of Each Receipt this Period 1400.00

**SUBTOTAL** of Receipts This Page (optional) ..... 2600.00  
**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 85  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Rita Balian</p> <p>Mailing Address 1300 Crystal Dr No. 1505</p> <p>City Arlington State VA Zip Code 22202-3234</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer n/a Occupation Homemaker</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">09 / 30 / 2009</span></p> <p><b>Transaction ID:</b> C24846</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Millard Barger</p> <p>Mailing Address 8315 Lee Highway Suite 303</p> <p>City Fairfax State VA Zip Code 22031</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Group W Inc. Occupation Chief of Communications</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">2000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">09 / 01 / 2009</span></p> <p><b>Transaction ID:</b> C24790</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">2000.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) James W. Brady</p> <p>Mailing Address 3218 Amberley Ln.</p> <p>City Fairfax State VA Zip Code 22031</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Group W Occupation President</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">2000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">09 / 01 / 2009</span></p> <p><b>Transaction ID:</b> C24789</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">2000.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">4500.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 85  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) William L. Bransford</p> <p>Mailing Address 3317 R St NW</p> <p>City State Zip Code Washington DC 20007-2310</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Shaw Bransford Veilleux &amp; Roth</p> <p>Occupation Attorney</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">2000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">22</span> / <span style="border: 1px solid black; padding: 2px;">2009</span></p> <p><b>Transaction ID:</b> C24771</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) William L. Bransford</p> <p>Mailing Address 3317 R St NW</p> <p>City State Zip Code Washington DC 20007-2310</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Shaw Bransford Veilleux &amp; Roth</p> <p>Occupation Attorney</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">2000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">09</span> / <span style="border: 1px solid black; padding: 2px;">30</span> / <span style="border: 1px solid black; padding: 2px;">2009</span></p> <p><b>Transaction ID:</b> C24843</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Paul A. Brathwaite</p> <p>Mailing Address 13102 Jordans Endeavor Dr.</p> <p>City State Zip Code Bowie MD 20720</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Podesta Group</p> <p>Occupation Principal</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">09</span> / <span style="border: 1px solid black; padding: 2px;">23</span> / <span style="border: 1px solid black; padding: 2px;">2009</span></p> <p><b>Transaction ID:</b> C24807</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">250.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">1250.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 85  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Moran for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) John A. Braun</p> <p>Mailing Address 6374 Dockser Ter</p> <p>City Falls Church State VA Zip Code 22041-1305</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Teledyne Brown Engineering, Inc. Occupation Director, Wash Ops</p> <p>Receipt For: 2010  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">4800.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 9 / 2 4 / 2 0 0 9</span></p> <p><b>Transaction ID:</b> C24828</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">2400.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Aaron P. Brown, II</p> <p>Mailing Address 2710 Williamsburg St. Apt. 403</p> <p>City Alexandria State VA Zip Code 22314</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Critical Response Manufacturing, Inc. Occupation Chairman</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">2000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 9 / 3 0 / 2 0 0 9</span></p> <p><b>Transaction ID:</b> C24859</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Aaron P. Brown, II</p> <p>Mailing Address 2710 Williamsburg St. Apt. 403</p> <p>City Alexandria State VA Zip Code 22314</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Critical Response Manufacturing, Inc. Occupation Chairman</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">2000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 9 / 3 0 / 2 0 0 9</span></p> <p><b>Transaction ID:</b> C24860</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">4400.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 85  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

**A.** Full Name (Last, First, Middle Initial)  
Thomas R. Burger

Mailing Address 10712 John Ayres Dr.

City State Zip Code  
Fairfax VA 22032-3119

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

Name of Employer: Professional Managers Association  
Occupation: Govt Relations Rep

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 07 / 22 / 2009  
Transaction ID: C24772

Amount of Each Receipt this Period: 500.00

Amount of Each Receipt this Period: 500.00

**B.** Full Name (Last, First, Middle Initial)  
Habib E. Debs

Mailing Address 7716 Carlton PI

City State Zip Code  
McLean VA 22102-2149

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

Name of Employer: Advanced Technology Systems  
Occupation: President/CEO

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 09 / 23 / 2009  
Transaction ID: C24802

Amount of Each Receipt this Period: 1400.00

Amount of Each Receipt this Period: 3000.00

**C.** Full Name (Last, First, Middle Initial)  
Habib E. Debs

Mailing Address 7716 Carlton PI

City State Zip Code  
McLean VA 22102-2149

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

Name of Employer: Advanced Technology Systems  
Occupation: President/CEO

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 09 / 23 / 2009  
Transaction ID: C24803

Amount of Each Receipt this Period: 600.00

Amount of Each Receipt this Period: 3000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 85
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Theresa M. Dupart	Date of Receipt MM / DD / YYYY 07 / 22 / 2009
	Mailing Address 802 Crews Rd.	<b>Transaction ID:</b> C24770
	City State Zip Code Great Falls VA 22066	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer n/a Occupation Homemaker Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Rachel A. Emmons	Date of Receipt MM / DD / YYYY 07 / 22 / 2009
	Mailing Address 3005 Woodchurck Rd.	<b>Transaction ID:</b> C24773
	City State Zip Code Bozeman MT 59715	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Greystone Group Occupation Partner Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Christine Fullner	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address 2800 Woodley Road, NW, #236	<b>Transaction ID:</b> C24845
	City State Zip Code Washington DC 20008	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Pharmaceutical Healthcare Distributors Occupation Vice President Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1750.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 12 / 85  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

**A.** Full Name (Last, First, Middle Initial)  
Stephen T. Hartell  
Mailing Address 2702 Mosby St.  
City Alexandria State VA Zip Code 22305-1825  
FEC ID number of contributing federal political committee. **C**  
Name of Employer EMC Group Occupation Government Affairs  
Receipt For: 2010 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 1500.00  
Date of Receipt 09 / 23 / 2009  
Transaction ID: C24819  
Amount of Each Receipt this Period 1500.00

**B.** Full Name (Last, First, Middle Initial)  
Thomas R. Holmes  
Mailing Address 612 Juan Anasco Dr  
City Longboat Key State FL Zip Code 34228-1425  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed Occupation Investor  
Receipt For: 2010 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 1500.00  
Date of Receipt 09 / 24 / 2009  
Transaction ID: C24834  
Amount of Each Receipt this Period 1500.00

**C.** Full Name (Last, First, Middle Initial)  
Margo E. Horner  
Mailing Address 3057 S Buchanan St No. B-2  
City Arlington State VA Zip Code 22206-1509  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Metro Wash Airports Auth. Occupation Executive Office Manager  
Receipt For: 2010 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 250.00  
Date of Receipt 09 / 30 / 2009  
Transaction ID: C24848  
Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3250.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 13 / 85  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Brad D. Joelson

Mailing Address 405 Oronoco Street

City State Zip Code  
Alexandria VA 22314

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

Name of Employer ISPA Technologies Occupation Managing Partner

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 23 / 2009

**Transaction ID: C24829**

Amount of Each Receipt this Period  
2400.00

**B.**

Full Name (Last, First, Middle Initial)  
Andrew Kauders

Mailing Address 1735 New Hampshire Avenue, NW, #20

City State Zip Code  
Washington DC 20009

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

Name of Employer The Podesta Group Occupation Principal

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 14 / 2009

**Transaction ID: C24797**

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
Thomas L. Kempner

Mailing Address 61 Broadway

City State Zip Code  
New York NY 10006-2701

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

Name of Employer Loeb Partners Corp. Occupation Investment Banking

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 26 / 2009

**Transaction ID: C24835**

Amount of Each Receipt this Period  
1500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4400.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 14 / 85</span> (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Linda K. Kocher</p> <p>Mailing Address 4828 N. 3rd Street</p> <p>City State Zip Code Arlington VA 22203</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer I3 Ideal Innovations</p> <p>Occupation Chief Administrative Officer</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary    <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">4500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">09 / 23 / 2009</span></p> <p><b>Transaction ID:</b> C24804</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">2000.00</span></p>
---	--

<p><b>B.</b> Full Name (Last, First, Middle Initial) Linda K. Kocher</p> <p>Mailing Address 4828 N. 3rd Street</p> <p>City State Zip Code Arlington VA 22203</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer I3 Ideal Innovations</p> <p>Occupation Chief Administrative Officer</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary    <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">4500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">09 / 23 / 2009</span></p> <p><b>Transaction ID:</b> C24805</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">400.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Linda K. Kocher</p> <p>Mailing Address 4828 N. 3rd Street</p> <p>City State Zip Code Arlington VA 22203</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer I3 Ideal Innovations</p> <p>Occupation Chief Administrative Officer</p> <p>Receipt For: 2010  <input type="checkbox"/> Primary    <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">4500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">09 / 23 / 2009</span></p> <p><b>Transaction ID:</b> C24806</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">2100.00</span></p>
---	--

<p><b>SUBTOTAL</b> of Receipts This Page (optional) .....</p>	<span style="border: 1px solid black; padding: 2px;">4500.00</span>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 85  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

**A.** Full Name (Last, First, Middle Initial)  
James E. Ladd

Mailing Address 2314 Saint Marys Road

City Hillsborough State NC Zip Code 27278

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

Name of Employer AIRDAT, LLC Occupation CEO

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2009

**Transaction ID: C24838**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Bruce L. Lev

Mailing Address 736 Titicus Road

City North Salem State NY Zip Code 10560

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

Name of Employer Loeb Partners Corp. Occupation Managing Director

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 26 / 2009

**Transaction ID: C24836**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
David L. Marin

Mailing Address 12201 Hounds Ln.

City Reston State VA Zip Code 20191

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

Name of Employer Podesta Group Occupation Executive

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 23 / 2009

**Transaction ID: C24812**

Amount of Each Receipt this Period  
500.00

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 85  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

**A.** Full Name (Last, First, Middle Initial)  
Geobel A. Marin

Mailing Address 2 Grenloch Dr.

City Titusville State NJ Zip Code 08560-1114

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

Name of Employer Mercer Gastroenterology Occupation Physician

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 23 / 2009  
**Transaction ID: C24813**  
 Amount of Each Receipt this Period 500.00

**B.** Full Name (Last, First, Middle Initial)  
Herbert S. Miller

Mailing Address 3249 N St., NW

City Washington State DC Zip Code 20007

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

Name of Employer Western Development Occupation COB

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3900.00

Date of Receipt 09 / 23 / 2009  
**Transaction ID: C24816**  
 Amount of Each Receipt this Period 1500.00

**C.** Full Name (Last, First, Middle Initial)  
Elizabeth A. Morra

Mailing Address 6219 Poindexter Ln.

City Rockville State MD Zip Code 20852

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

Name of Employer Podesta Group Occupation Principal

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 23 / 2009  
**Transaction ID: C24811**  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2500.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 85  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Moran for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Thomas P. O'Neill, III

Mailing Address 31 New Chardon St.

City Boston State MA Zip Code 02114

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

Name of Employer O'Neill & Associates Occupation CEO

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 23 / 2009

Transaction ID: C24808

Amount of Each Receipt this Period 500.00

**B.**

Full Name (Last, First, Middle Initial)  
Dale P. Oak

Mailing Address 1401 N. Nicholas St.

City Arlington State VA Zip Code 22205

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

Name of Employer Podesta Group Occupation Principal

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 23 / 2009

Transaction ID: C24814

Amount of Each Receipt this Period 500.00

**C.**

Full Name (Last, First, Middle Initial)  
Linda J. Roberts

Mailing Address 4115 Campbell Road

City Troy State VA Zip Code 22974-3210

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

Name of Employer SAIC Occupation Analyst

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt 09 / 30 / 2009

Transaction ID: C24861

Amount of Each Receipt this Period 2400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3400.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 85

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Moran for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Matthew D. Roberts

Mailing Address 4115 Campbell Rd.

City State Zip Code  
Troy VA 22974

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

Name of Employer Occupation  
n/a Retired

Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 2400.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 30 / 2009

Transaction ID: C24862

Amount of Each Receipt this Period

2400.00

**B.**

Full Name (Last, First, Middle Initial)  
Edwin Rothschild

Mailing Address 1229 Providence Terr.

City State Zip Code  
McLean VA 22101-2648

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

Name of Employer Occupation  
Shon, Bald & Reddish Principal

Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 23 / 2009

Transaction ID: C24818

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
Domenic Ruscio

Mailing Address 316 Pennsylvania Ave SE  
Ste 403

City State Zip Code  
Washington DC 20003-1172

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

Name of Employer Occupation  
CRD Associates Consultant

Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 30 / 2009

Transaction ID: C24841

Amount of Each Receipt this Period

2000.00

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

4650.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 85  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

**A.** Full Name (Last, First, Middle Initial)  
Victoria P. Sant

Mailing Address 2929 N St NW

City Washington State DC Zip Code 20007-3342

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

Name of Employer The Summit Foundation Occupation President

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt 09 / 30 / 2009  
**Transaction ID: C24864**  
 Amount of Each Receipt this Period 2400.00

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

Mailing Address 6621 Wakefield Dr. #318

City Alexandria State VA Zip Code 22307

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

Name of Employer Enviaance Occupation VP, Fed Rel & Bus Dev

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 23 / 2009  
**Transaction ID: C24817**  
 Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
William Soza

Mailing Address 1295 Ballantrae Farm Dr

City McLean State VA Zip Code 22101-3027

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

Name of Employer n/a Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2200.00

Date of Receipt 09 / 30 / 2009  
**Transaction ID: C24839**  
 Amount of Each Receipt this Period 2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4900.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 85  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

**A.** Full Name (Last, First, Middle Initial)  
Valdis G. Straubs

Mailing Address 5751 General Washington Dr.

City State Zip Code  
Alexandria VA 22312

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

Name of Employer Occupation  
Ultra Electronics Director of Marketing

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	2	/	2	0	0	9

**Transaction ID:** C24774

Amount of Each Receipt this Period  
500.00

Election Cycle-to-Date ▼ 500.00

**B.** Full Name (Last, First, Middle Initial)  
Robert S. Tamaru

Mailing Address 11990 Market St.  
Unit 2113

City State Zip Code  
Reston VA 20190

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

Name of Employer Occupation  
Argon ST, Inc. Vice President/Technology

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	9

**Transaction ID:** C24858

Amount of Each Receipt this Period  
1000.00

Election Cycle-to-Date ▼ 1000.00

**C.** Full Name (Last, First, Middle Initial)  
The Chickasaw Nation

Mailing Address PO Box 1548

City State Zip Code  
Ada OK 74820

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

Name of Employer Occupation

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

**Transaction ID:** C24796

Amount of Each Receipt this Period  
1000.00

Election Cycle-to-Date ▼ 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 85  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

**A.** Full Name (Last, First, Middle Initial)  
John M. Tromba

Mailing Address 2303 William & Mary Drive

City State Zip Code  
Alexandria VA 22308

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

Name of Employer EMSolutions, Inc. Occupation Sector President

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	9

Transaction ID: C24840

Amount of Each Receipt this Period  
500.00

Election Cycle-to-Date ▼ 500.00

**B.** Full Name (Last, First, Middle Initial)  
Joseph F. Vlar, Jr.

Mailing Address 7827 Southdown Rd

City State Zip Code  
Alexandria VA 22308-1343

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

Name of Employer n/a Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

Transaction ID: C24800

Amount of Each Receipt this Period  
1000.00

Election Cycle-to-Date ▼ 1000.00

**C.** Full Name (Last, First, Middle Initial)  
George Vradenburg, III

Mailing Address 2901 Woodland Drive, NW

City State Zip Code  
Washington DC 20008

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

Name of Employer Vradenburg Foundation Occupation President

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	3	/	2	0	0	9

Transaction ID: C24815

Amount of Each Receipt this Period  
1000.00

Election Cycle-to-Date ▼ 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 85  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

**A.** Full Name (Last, First, Middle Initial)  
W. Edward Walter

Mailing Address 950 Bellview Road

City State Zip Code  
McLean VA 22102-1202

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

Name of Employer Occupation  
Host Hotels & Resorts President/CEO

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	9

Transaction ID: C24842

Amount of Each Receipt this Period  
1000.00

Election Cycle-to-Date ▼ 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Wayne Zandbergen

Mailing Address 1950 N. Calvert St.  
Apt. 302

City State Zip Code  
Arlington VA 22201-4176

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

Name of Employer Occupation  
Group W President

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

Transaction ID: C24792

Amount of Each Receipt this Period  
2400.00

Election Cycle-to-Date ▼ 2400.00

**C.** Full Name (Last, First, Middle Initial)  
Cristina Antelo

Mailing Address 2312 First Street, NW

City State Zip Code  
Washington DC 20001

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

Name of Employer Occupation  
Podesta Group Attorney

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

Transaction ID: C24833A

Amount of Each Receipt this Period  
200.00

Election Cycle-to-Date ▼ 400.00

\* Earmarked Contribution:  
See Below

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3600.00**

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

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

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

FOR LINE NUMBER: PAGE 23 / 85  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

**A.** Full Name (Last, First, Middle Initial)  
ACTBLUE  
Mailing Address P.O. Box 382110  
City State Zip Code  
Cambridge MA 02238  
FEC ID number of contributing federal political committee. **C** C00401224  
Name of Employer Occupation  
Conduit total listed in Agg. field  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 700.00  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
Anthony T. Podesta  
Mailing Address 1001 G Street, NW  
City State Zip Code  
Washington DC 20001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
The Podesta Group Chairman  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 500.00  
\* Earmarked Contribution:  
See Below

**C.** Full Name (Last, First, Middle Initial)  
ACTBLUE  
Mailing Address P.O. Box 382110  
City State Zip Code  
Cambridge MA 02238  
FEC ID number of contributing federal political committee. **C** C00401224  
Name of Employer Occupation  
Conduit total listed in Agg. field  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 700.00  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	61600.00

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

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

FOR LINE NUMBER: PAGE 24 / 85  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN MARITIME OFFICERS VOLUNTARY POLITICAL ACTION FUND  
 Mailing Address 2 West Dixie Highway  
 City State Zip Code  
 Dania Beach FL 33004  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2009  
**Transaction ID:** C24867  
 Amount of Each Receipt this Period  
 2500.00  
 FEC ID number of contributing federal political committee. **C** C00027532  
 Name of Employer Occupation  
 Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5000.00

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN POSTAL WORKERS UNION COMMITTEE ON POLITICAL ACTION  
 Mailing Address 1300 L Street NW  
 City State Zip Code  
 Washington DC 20005  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2009  
**Transaction ID:** C24855  
 Amount of Each Receipt this Period  
 2500.00  
 FEC ID number of contributing federal political committee. **C** C00010322  
 Name of Employer Occupation  
 Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES APAC  
 Mailing Address 1575 I Street, NW  
 City State Zip Code  
 Washington DC 20005  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2009  
**Transaction ID:** C24868  
 Amount of Each Receipt this Period  
 1500.00  
 FEC ID number of contributing federal political committee. **C** C00041566  
 Name of Employer Occupation  
 Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 3000.00

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



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

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

FOR LINE NUMBER: PAGE 25 / 85  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

**A.** Full Name (Last, First, Middle Initial)  
AUTOMOTIVE FREE INTERNATIONAL TRADE PAC

Mailing Address 1625 Prince Street  
Suite 225

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00250399

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	9

**Transaction ID:** C24851

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
BECHTEL GROUP, INC. POLITICAL ACTION COMMITTEE (BECHTEL POLITICAL ACTION COMMITTEE)

Mailing Address 50 BEALE STREET

City State Zip Code  
SAN FRANCISCO CA 94105

FEC ID number of contributing federal political committee. **C** C00103697

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	9

**Transaction ID:** C24850

Amount of Each Receipt this Period  
3000.00

**C.** Full Name (Last, First, Middle Initial)  
BOEING COMPANY POLITICAL ACTION COMMITTEE, THE

Mailing Address 1200 Wilson Blvd

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	9

**Transaction ID:** C24854

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **10500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 85  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

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

Mailing Address 1666 K STREET NW SUITE 700

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00389296

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 09 / 23 / 2009  
**Transaction ID: C24825**  
 Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
CRUISE LINES INTERNATIONAL ASSOCIATION PAC (CLIA PAC)

Mailing Address 2111 WILSON BOULEVARD 8TH FLOOR

City ARLINGTON State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C** C00432393

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 09 / 30 / 2009  
**Transaction ID: C24873**  
 Amount of Each Receipt this Period: 1000.00

**C.** Full Name (Last, First, Middle Initial)  
DYNAMICS RESEARCH CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 60 Frontage Road

City Andover State MA Zip Code 01810

FEC ID number of contributing federal political committee. **C** C00362582

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 09 / 23 / 2009  
**Transaction ID: C24824**  
 Amount of Each Receipt this Period: 2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4500.00

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

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

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

FOR LINE NUMBER: PAGE 27 / 85  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

**A.** Full Name (Last, First, Middle Initial)  
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Mailing Address 3699 WILSHIRE BLVD., #1290

City State Zip Code  
LOS ANGELES CA 90010

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2009

**Transaction ID:** C24871

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
FAA MANAGERS ASSOCIATION INC. PAC

Mailing Address 1015 Atlantic Blvd.  
Suite 245

City State Zip Code  
Atlantic Beach FL 32233

FEC ID number of contributing federal political committee. **C** C00366070

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 22 / 2009

**Transaction ID:** C24779

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
FEDERAL MANAGERS' ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1641 PRINCE STREET

City State Zip Code  
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00164848

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 22 / 2009

**Transaction ID:** C24778

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 85  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

**A.** Full Name (Last, First, Middle Initial)  
GENERAL DYNAMICS VOLUNTARY POLITICAL CONTRIBUTION PLAN (GDVPCP)

Mailing Address 2941 Fairview Park Dr.  
Suite 100

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 6500.00

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

**Transaction ID:** C24823

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
GENERAL DYNAMICS VOLUNTARY POLITICAL CONTRIBUTION PLAN (GDVPCP)

Mailing Address 2941 Fairview Park Dr.  
Suite 100

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 6500.00

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

**Transaction ID:** C24826

Amount of Each Receipt this Period  
 1500.00

**C.** Full Name (Last, First, Middle Initial)  
HOME DEPOT INC. POLITICAL ACTION COMMITTEE, THE

Mailing Address 101 Constitution Ave. NW  
Suite 800 West

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00284885

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

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

**Transaction ID:** C24852

Amount of Each Receipt this Period  
 2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 85
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Moran for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) INTERNATIONAL ASSOCIATION OF BRIDGE STRUCTURAL & ORNAMENTAL IRON WORKERS LOCAL 09	Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2009
	Mailing Address 1501 EAST AURORA	Transaction ID: C24856
	City State Zip Code DES MOINES IA 50313	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. <b>C</b> C00156554	
	Name of Employer Occupation	
	Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2500.00

<b>B.</b>	Full Name (Last, First, Middle Initial) INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS POLITICAL ACTION COMMITTEE	Date of Receipt M M / D D / Y Y Y Y Y 09 / 23 / 2009
	Mailing Address 900 Seventh St, NW	Transaction ID: C24827
	City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b> C00027342	
	Name of Employer Occupation	
	Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 10000.00

<b>C.</b>	Full Name (Last, First, Middle Initial) ITT CORPORATION PAC (ITTPAC)	Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2009
	Mailing Address 1133 Westchester Ave	Transaction ID: C24872
	City State Zip Code WHITE PLAINS NY 10604	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. <b>C</b> C00141002	
	Name of Employer Occupation	
	Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	10000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 85  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

**A.** Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF POSTAL SUPERVISORS POLITICAL ACTION COMMITTEE

Mailing Address 1727 King Street  
Suite 400

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00092957

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 07 / 22 / 2009  
**Transaction ID: C24775**  
 Amount of Each Receipt this Period: 2500.00

**B.** Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF POSTMASTERS OF THE UNITED STATES (NAPUS PAC)

Mailing Address 8 Herbert Street

City Alexandria State VA Zip Code 22305

FEC ID number of contributing federal political committee. **C** C00100404

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5500.00

Date of Receipt: 07 / 22 / 2009  
**Transaction ID: C24777**  
 Amount of Each Receipt this Period: 1000.00

**C.** Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF POSTMASTERS OF THE UNITED STATES (NAPUS PAC)

Mailing Address 8 Herbert Street

City Alexandria State VA Zip Code 22305

FEC ID number of contributing federal political committee. **C** C00100404

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5500.00

Date of Receipt: 09 / 30 / 2009  
**Transaction ID: C24870**  
 Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 85

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Moran for Congress

**A.**

Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF POSTMASTERS OF THE UNITED STATES (NAPUS PAC)

Mailing Address 8 Herbert Street

City State Zip Code  
Alexandria VA 22305

FEC ID number of contributing federal political committee. **C** C00100404

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 30 / 2009

Transaction ID: C24869

Amount of Each Receipt this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)  
NATIONAL TREASURY EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address 1750 H Street, NW

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00107128

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 30 / 2009

Transaction ID: C24849

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
NATIONAL TREASURY EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address 1750 H Street, NW

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00107128

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 30 / 2009

Transaction ID: C24853

Amount of Each Receipt this Period

2000.00

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

4500.00

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

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

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

FOR LINE NUMBER: PAGE 32 / 85

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

**A.**

Full Name (Last, First, Middle Initial)  
NEW DEMOCRAT COALITION POLITICAL ACTION COMMITTEE AKA NDC PAC

Mailing Address 607 14th Street NW Suite 800

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00409730

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 30 / 2009

Transaction ID: C24847

Amount of Each Receipt this Period

3000.00

**B.**

Full Name (Last, First, Middle Initial)  
O'NEILL AND ASSOCIATES PAC

Mailing Address 31NEW CHARDON STREET

City State Zip Code  
BOSTON MA 02114

FEC ID number of contributing federal political committee. **C** C00362210

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 23 / 2009

Transaction ID: C24809

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
ORACLE USA INC. POLITICAL ACTION COMMITTEE (ORACLE PAC)

Mailing Address 1015 15th St. NW Suite 200  
Suite 200

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00323048

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 22 / 2009

Transaction ID: C24776

Amount of Each Receipt this Period

1000.00

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

5000.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 85  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

**A.** Full Name (Last, First, Middle Initial)  
OWENS-ILLINOIS INC EMPLOYEES GOOD CITIZENSHIP FUND

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	2	/	2	0	0	9

Mailing Address One O-I Plaza  
One Michael Owens Way

City State Zip Code  
Perrysburg OH 43551

Transaction ID: C24781

Amount of Each Receipt this Period  
1000.00

FEC ID number of contributing federal political committee. **C** C00034330

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
PROFESSIONAL AVIATION SAFETY SPECIALISTS PAC

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	2	/	2	0	0	9

Mailing Address 1150 17th Street NW  
Suite 702

City State Zip Code  
Washington DC 20036

Transaction ID: C24780

Amount of Each Receipt this Period  
1000.00

FEC ID number of contributing federal political committee. **C** C00286807

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
PROFESSIONAL AVIATION SAFETY SPECIALISTS PAC

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	3	/	2	0	0	9

Mailing Address 1150 17th Street NW  
Suite 702

City State Zip Code  
Washington DC 20036

Transaction ID: C24821

Amount of Each Receipt this Period  
1500.00

FEC ID number of contributing federal political committee. **C** C00286807

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3500.00**

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

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

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

FOR LINE NUMBER: PAGE 34 / 85  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

**A.** Full Name (Last, First, Middle Initial)  
SANOFI-AVENTIS U.S. INC. EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address 801 Pennsylvania Avenue NW  
Suite 725

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00144345

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 09 / 01 / 2009  
**Transaction ID: C24795**  
 Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
UNISYS CORPORATION EMPLOYEES PAC

Mailing Address 1200 South Hayes Street  
Suite 1100

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00345603

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 09 / 23 / 2009  
**Transaction ID: C24822**  
 Amount of Each Receipt this Period: 2500.00

**C.** Full Name (Last, First, Middle Initial)  
UNITED AIRLINES POLITICAL ACTION COMMITTEE

Mailing Address PO Box 66100 - Fin.Reporting WHQAJ  
ATTN: Financial Reporting-WHQAJ

City Chicago State IL Zip Code 60666

FEC ID number of contributing federal political committee. **C** C00078261

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 09 / 30 / 2009  
**Transaction ID: C24874**  
 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 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 85  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.

Full Name (Last, First, Middle Initial)  
UNITED TECHNOLOGIES CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 1401 I Street, NW  
Suite 600

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00035683

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2009

Transaction ID: C24866

Amount of Each Receipt this Period  
2000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	70000.00

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

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

FOR LINE NUMBER: PAGE 36 / 85  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

**A.** Full Name (Last, First, Middle Initial)  
James P. Moran, Jr.  
 Mailing Address 311 North Washington Street  
Suite 200L  
 City Alexandria State VA Zip Code 22314  
 FEC ID number of contributing federal political committee. **C** H0VA08040  
 Name of Employer Occupation  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2775.00  
 Date of Receipt 09 / 01 / 2009  
**Transaction ID:** C24783  
 Amount of Each Receipt this Period 250.00  
 Car reimbursement

**B.** Full Name (Last, First, Middle Initial)  
James P. Moran, Jr.  
 Mailing Address 311 North Washington Street  
Suite 200L  
 City Alexandria State VA Zip Code 22314  
 FEC ID number of contributing federal political committee. **C** H0VA08040  
 Name of Employer Occupation  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2775.00  
 Date of Receipt 09 / 01 / 2009  
**Transaction ID:** C24784  
 Amount of Each Receipt this Period 250.00  
 Car reimbursement

**C.** Full Name (Last, First, Middle Initial)  
James P. Moran, Jr.  
 Mailing Address 311 North Washington Street  
Suite 200L  
 City Alexandria State VA Zip Code 22314  
 FEC ID number of contributing federal political committee. **C** H0VA08040  
 Name of Employer Occupation  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2775.00  
 Date of Receipt 09 / 23 / 2009  
**Transaction ID:** C24820  
 Amount of Each Receipt this Period 250.00  
 car reimbursement

**SUBTOTAL** of Receipts This Page (optional) ..... ► 750.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 37 / 85

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Hannah B. Margetich

Mailing Address 800 S Saint Asaph St  
Apt 301

City State Zip Code  
Alexandria VA 22314-4361

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

Name of Employer Occupation  
Moran for Congress Fundraising

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 835.61

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2009

Transaction ID: C24782

Amount of Each Receipt this Period

835.61

Reimburse/American Express payment

**B.**

Full Name (Last, First, Middle Initial)  
Virginia Department of Taxation

Mailing Address PO Box 27264

City State Zip Code  
Richmond VA 23261-7264

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

Name of Employer Occupation

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 726.72

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 01 / 2009

Transaction ID: C24793

Amount of Each Receipt this Period

193.00

Tax overpayment

**C.**

Full Name (Last, First, Middle Initial)  
Virginia Department of Taxation

Mailing Address PO Box 27264

City State Zip Code  
Richmond VA 23261-7264

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

Name of Employer Occupation

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 726.72

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 01 / 2009

Transaction ID: C24794

Amount of Each Receipt this Period

533.72

Tax overpayment

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

1562.33

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

2312.33

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

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

FOR LINE NUMBER: PAGE 38 / 85  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Moran for Congress

**A.** Full Name (Last, First, Middle Initial)  
Virginia Commerce Bank  
Mailing Address 5350 Lee Hwy

City State Zip Code  
Arlington VA 22207-1608

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1231.41

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	3	1	/	2	0	0	9

**Transaction ID:** C24831  
 Amount of Each Receipt this Period  
 88.44

\* Interest income

**B.** Full Name (Last, First, Middle Initial)  
Virginia Commerce Bank  
Mailing Address 5350 Lee Hwy

City State Zip Code  
Arlington VA 22207-1608

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1231.41

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	0	9

**Transaction ID:** C24832  
 Amount of Each Receipt this Period  
 86.75

\* Interest income

**C.** Full Name (Last, First, Middle Initial)  
Virginia Commerce Bank  
Mailing Address 5350 Lee Hwy

City State Zip Code  
Arlington VA 22207-1608

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1231.41

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	9

**Transaction ID:** C24830  
 Amount of Each Receipt this Period  
 80.27

\* Interest income

**SUBTOTAL** of Receipts This Page (optional) ..... ► **255.46**

**TOTAL** This Period (last page this line number only) ..... ► **255.46**

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.	Full Name (Last, First, Middle Initial) Airgas East <hr/> Mailing Address 17 Northwestern Dr <hr/> City Salem State NH Zip Code 03079-4809 <hr/> Purpose of Disbursement Helium for balloons Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D8924 Date of Disbursement 08 / 12 / 2009 <hr/> Amount of Each Disbursement this Period 16.86
B.	Full Name (Last, First, Middle Initial) Airgas East <hr/> Mailing Address 17 Northwestern Dr <hr/> City Salem State NH Zip Code 03079-4809 <hr/> Purpose of Disbursement Helium for balloons Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D8925 Date of Disbursement 07 / 17 / 2009 <hr/> Amount of Each Disbursement this Period 15.69
C.	Full Name (Last, First, Middle Initial) Alexandria Commission for the Arts <hr/> Mailing Address 1108 Jefferson Street <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Event sponsor Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D8926 Date of Disbursement 08 / 24 / 2009 <hr/> Amount of Each Disbursement this Period 250.00

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

282.55

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Animal Welfare League of Alexandria <hr/> Mailing Address 4101 Eisenhower Ave <hr/> City Alexandria State VA Zip Code 22304 <hr/> Purpose of Disbursement Event sponsor Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D8935 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 2 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 1200.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Apptix/Mi8 Inc. <hr/> Mailing Address PO Box 673819 <hr/> City Detroit State MI Zip Code 48267-3819 <hr/> Purpose of Disbursement Website expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D8936 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 174.56
<b>C.</b>	Full Name (Last, First, Middle Initial) Apptix/Mi8 Inc. <hr/> Mailing Address PO Box 673819 <hr/> City Detroit State MI Zip Code 48267-3819 <hr/> Purpose of Disbursement Website expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D8937 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 7 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 84.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1458.56</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) AT&amp;T Mobility</p> <p>Mailing Address PO Box 536216</p> <p>City Atlanta State GA Zip Code 30353-6216</p> <p>Purpose of Disbursement Telephone expense</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D8941</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <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="227.70"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) AT&amp;T Mobility</p> <p>Mailing Address PO Box 536216</p> <p>City Atlanta State GA Zip Code 30353-6216</p> <p>Purpose of Disbursement Telephone expense</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D8942</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <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="153.65"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) AT&amp;T Mobility</p> <p>Mailing Address PO Box 536216</p> <p>City Atlanta State GA Zip Code 30353-6216</p> <p>Purpose of Disbursement Telephone expense</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D8943</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <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="225.24"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="606.59"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) AT&amp;T Mobility</p> <p>Mailing Address PO Box 536216</p> <p>City Atlanta State GA Zip Code 30353-6216</p> <p>Purpose of Disbursement Telephone expense</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D8944</p> <p>Date of Disbursement 09 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 402.98</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) AT&amp;T Mobility</p> <p>Mailing Address PO Box 536216</p> <p>City Atlanta State GA Zip Code 30353-6216</p> <p>Purpose of Disbursement Telephone expense</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D8945</p> <p>Date of Disbursement 07 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 150.38</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) AT&amp;T Mobility</p> <p>Mailing Address PO Box 536216</p> <p>City Atlanta State GA Zip Code 30353-6216</p> <p>Purpose of Disbursement Telephone expense</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D8946</p> <p>Date of Disbursement 07 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 153.15</p>

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

706.51

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 43 / 85

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.	Full Name (Last, First, Middle Initial) Carefirst Blue Cross/Blue Shield <hr/> Mailing Address PO Box 79749 <hr/> City Baltimore State MD Zip Code 21279-0749 <hr/> Purpose of Disbursement Employee health insurance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D8960 Date of Disbursement 08 / 21 / 2009 <hr/> Amount of Each Disbursement this Period 472.67
B.	Full Name (Last, First, Middle Initial) Carefirst Blue Cross/Blue Shield <hr/> Mailing Address PO Box 79749 <hr/> City Baltimore State MD Zip Code 21279-0749 <hr/> Purpose of Disbursement Employee health insurance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D8961 Date of Disbursement 07 / 20 / 2009 <hr/> Amount of Each Disbursement this Period 472.67
C.	Full Name (Last, First, Middle Initial) Carefirst Blue Cross/Blue Shield <hr/> Mailing Address PO Box 79749 <hr/> City Baltimore State MD Zip Code 21279-0749 <hr/> Purpose of Disbursement Employee health insurance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D8962 Date of Disbursement 09 / 20 / 2009 <hr/> Amount of Each Disbursement this Period 472.67

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

1418.01

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) City of Alexandria <hr/> Mailing Address PO Box 178 <hr/> City Alexandria State VA Zip Code 22313-1500 Purpose of Disbursement Business property tax Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D8967 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 9
	Amount of Each Disbursement this Period 254.70
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Comcast <hr/> Mailing Address PO Box 827554 <hr/> City Philadelphia State PA Zip Code 19182-7554 Purpose of Disbursement Cable Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D8974 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 9
	Amount of Each Disbursement this Period 99.95
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Comcast <hr/> Mailing Address PO Box 827554 <hr/> City Philadelphia State PA Zip Code 19182-7554 Purpose of Disbursement Cable Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D8971 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 9
	Amount of Each Disbursement this Period 99.95
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

454.60

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Comcast  Mailing Address PO Box 827554  City Philadelphia State PA Zip Code 19182-7554  Purpose of Disbursement Cable Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D8972 Date of Disbursement 07 / 24 / 2009  Amount of Each Disbursement this Period 99.95  Category/Type
<b>B.</b>	Full Name (Last, First, Middle Initial) D & P Printing & Graphics, Inc.  Mailing Address 5641-I General Washington Drive  City Alexandria State VA Zip Code 22312  Purpose of Disbursement Printing expense Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D8976 Date of Disbursement 09 / 09 / 2009  Amount of Each Disbursement this Period 1444.80  Category/Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Joseph Easton  Mailing Address 4400 Lee Highway #207  City Arlington State VA Zip Code 22207  Purpose of Disbursement Salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D9030 Date of Disbursement 07 / 01 / 2009  Amount of Each Disbursement this Period 3304.00  Category/Type

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

4848.75

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.	Full Name (Last, First, Middle Initial) Joseph Easton	Transaction ID: D9031 Date of Disbursement 09 / 01 / 2009
	Mailing Address 4400 Lee Highway #207	Amount of Each Disbursement this Period 3304.00
	City Arlington State VA Zip Code 22207	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Joseph Easton	Transaction ID: D9032 Date of Disbursement 08 / 01 / 2009
	Mailing Address 4400 Lee Highway #207	Amount of Each Disbursement this Period 3304.00
	City Arlington State VA Zip Code 22207	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) First Data	Transaction ID: D8921 Date of Disbursement 09 / 30 / 2009
	Mailing Address PO Box 5180	Amount of Each Disbursement this Period 230.19
	City Simi Valley State CA Zip Code 93062	
	Purpose of Disbursement Merchant fees Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>6838.19</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) First Data <hr/> Mailing Address PO Box 5180 <hr/> City Simi Valley State CA Zip Code 93062 <hr/> Purpose of Disbursement Merchant fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9001 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 9
	Amount of Each Disbursement this Period 74.90
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:

<b>B.</b> Full Name (Last, First, Middle Initial) First Data <hr/> Mailing Address PO Box 5180 <hr/> City Simi Valley State CA Zip Code 93062 <hr/> Purpose of Disbursement Merchant fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9002 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 6 / 2 0 0 9
	Amount of Each Disbursement this Period 76.03
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:

<b>C.</b> Full Name (Last, First, Middle Initial) First Data <hr/> Mailing Address PO Box 5180 <hr/> City Simi Valley State CA Zip Code 93062 <hr/> Purpose of Disbursement Merchant fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9003 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 9
	Amount of Each Disbursement this Period 74.90
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	225.83
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) GEICO Insurance Co. <hr/> Mailing Address 5260 Western Ave <hr/> City Chevy Chase State MD Zip Code 20815-3701 <hr/> Purpose of Disbursement Car insurance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9005 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 442.99
<b>B.</b>	Full Name (Last, First, Middle Initial) GEICO Insurance Co. <hr/> Mailing Address 5260 Western Ave <hr/> City Chevy Chase State MD Zip Code 20815-3701 <hr/> Purpose of Disbursement Car insurance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9006 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 3 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 442.99
<b>C.</b>	Full Name (Last, First, Middle Initial) GEICO Insurance Co. <hr/> Mailing Address 5260 Western Ave <hr/> City Chevy Chase State MD Zip Code 20815-3701 <hr/> Purpose of Disbursement Car insurance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9007 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 442.99

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

1328.97

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



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Stephen T. Hartell Mailing Address 2702 Mosby St. City Alexandria State VA Zip Code 22305-1825 Purpose of Disbursement Fundraising/Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9061 Date of Disbursement 09 / 08 / 2009 Amount of Each Disbursement this Period 750.00 Category/Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Stephen T. Hartell Mailing Address 2702 Mosby St. City Alexandria State VA Zip Code 22305-1825 Purpose of Disbursement Fundraising/Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9062 Date of Disbursement 09 / 12 / 2009 Amount of Each Disbursement this Period 1221.07 Category/Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Hartford Mailing Address PO Box 2907 City Hartford State CT Zip Code 06104-2907 Purpose of Disbursement Office insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9106 Date of Disbursement 08 / 24 / 2009 Amount of Each Disbursement this Period 571.00 Category/Type

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

2542.07

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.

Full Name (Last, First, Middle Initial)  
John King

Transaction ID: D9029  
Date of Disbursement

Mailing Address 4714 Argyle Avenue, #407

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	0	9

City State Zip Code  
Garrett Park MD 20896

Amount of Each Disbursement this Period

900.00
--------

Purpose of Disbursement  
Computer repair/maintenance

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Hannah B. Margetich

Transaction ID: D9008  
Date of Disbursement

Mailing Address 800 S Saint Asaph St  
Apt 301

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	0	9

City State Zip Code  
Alexandria VA 22314-4361

Amount of Each Disbursement this Period

108.76
--------

Purpose of Disbursement  
Fundraising event exp (none over \$200)

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Hannah B. Margetich

Transaction ID: D9009  
Date of Disbursement

Mailing Address 800 S Saint Asaph St  
Apt 301

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

City State Zip Code  
Alexandria VA 22314-4361

Amount of Each Disbursement this Period

92.12
-------

Purpose of Disbursement  
Replace lost check from 11/21/08

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

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

<b>1100.88</b>
----------------

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

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# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.	Full Name (Last, First, Middle Initial) Hannah B. Margetich	Transaction ID: D9010 Date of Disbursement MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 800 S Saint Asaph St Apt 301	Amount of Each Disbursement this Period 3042.50
	City Alexandria State VA Zip Code 22314-4361	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

B.	Full Name (Last, First, Middle Initial) Hannah B. Margetich	Transaction ID: D9011 Date of Disbursement MM / DD / YYYY 07 / 31 / 2009
	Mailing Address 800 S Saint Asaph St Apt 301	Amount of Each Disbursement this Period 72.64
	City Alexandria State VA Zip Code 22314-4361	
	Purpose of Disbursement Office supplies (none over \$200) Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

C.	Full Name (Last, First, Middle Initial) Hannah B. Margetich	Transaction ID: D9012 Date of Disbursement MM / DD / YYYY 08 / 01 / 2009
	Mailing Address 800 S Saint Asaph St Apt 301	Amount of Each Disbursement this Period 3042.50
	City Alexandria State VA Zip Code 22314-4361	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	6157.64
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Hannah B. Margetich <hr/> Mailing Address 800 S Saint Asaph St Apt 301 <hr/> City Alexandria State VA Zip Code 22314-4361 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9013 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 3042.50
<b>B.</b>	Full Name (Last, First, Middle Initial) Hannah B. Margetich <hr/> Mailing Address 800 S Saint Asaph St Apt 301 <hr/> City Alexandria State VA Zip Code 22314-4361 <hr/> Purpose of Disbursement 11/25/08 check lost Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9103 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period -92.12
<b>C.</b>	Full Name (Last, First, Middle Initial) Jacquie Melgar <hr/> Mailing Address 800 S Saint Asaph St Apt 303 <hr/> City Alexandria State VA Zip Code 22314-4361 <hr/> Purpose of Disbursement Fundraising consulting fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9021 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 400.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3350.38
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.	Full Name (Last, First, Middle Initial) Jacquie Melgar Mailing Address 800 S Saint Asaph St Apt 303 City Alexandria State VA Zip Code 22314-4361 Purpose of Disbursement Fundraising consulting fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9022 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 9 Amount of Each Disbursement this Period 400.00 Category/Type
B.	Full Name (Last, First, Middle Initial) Jacquie Melgar Mailing Address 800 S Saint Asaph St Apt 303 City Alexandria State VA Zip Code 22314-4361 Purpose of Disbursement Fundraising consulting fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9023 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 9 Amount of Each Disbursement this Period 1500.00 Category/Type
C.	Full Name (Last, First, Middle Initial) Jacquie Melgar Mailing Address 800 S Saint Asaph St Apt 303 City Alexandria State VA Zip Code 22314-4361 Purpose of Disbursement 12/1/07 check re-issued Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9104 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 9 Amount of Each Disbursement this Period 1000.00 Category/Type

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

2900.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.	Full Name (Last, First, Middle Initial) Jacquie Melgar  Mailing Address 800 S Saint Asaph St Apt 303  City Alexandria State VA Zip Code 22314-4361  Purpose of Disbursement 1/2/08 check reissued Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9105 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 9  Amount of Each Disbursement this Period 400.00
B.	Full Name (Last, First, Middle Initial) NAACP Arlington  Mailing Address 951 S. George Mason Drive  City Arlington State VA Zip Code 22204  Purpose of Disbursement Event sponsor Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9044 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 9  Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) Quill Corporation  Mailing Address PO Box 94081  City Palatine State IL Zip Code 60094  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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9049 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 9  Amount of Each Disbursement this Period 189.14

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1589.14
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Quill Corporation</p> <p>Mailing Address PO Box 94081</p> <p>City Palatine State IL Zip Code 60094</p> <p>Purpose of Disbursement Office supplies</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D9050</p> <p>Date of Disbursement 08 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 477.15</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Amanda Ruff</p> <p>Mailing Address 2905 Holly Street</p> <p>City Alexandria State VA Zip Code 22305</p> <p>Purpose of Disbursement Administrative consulting fee</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D8927</p> <p>Date of Disbursement 07 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 396.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Amanda Ruff</p> <p>Mailing Address 2905 Holly Street</p> <p>City Alexandria State VA Zip Code 22305</p> <p>Purpose of Disbursement Administrative consulting fee</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D8928</p> <p>Date of Disbursement 09 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 170.50</p>

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

1043.65

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) The Waverly Group, Inc.</p> <p>Mailing Address 6849 Old Dominion Dr Ste 222</p> <p>City McLean State VA Zip Code 22101-3705</p> <p>Purpose of Disbursement FEC Compliance &amp; Related Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D9069</p> <p>Date of Disbursement 09 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 2030.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Town &amp; Country Properties, Inc.</p> <p>Mailing Address 7901 Richmond Hwy</p> <p>City Alexandria State VA Zip Code 22306-3013</p> <p>Purpose of Disbursement Office rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D9071</p> <p>Date of Disbursement 07 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 2600.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Town &amp; Country Properties, Inc.</p> <p>Mailing Address 7901 Richmond Hwy</p> <p>City Alexandria State VA Zip Code 22306-3013</p> <p>Purpose of Disbursement Office rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D9072</p> <p>Date of Disbursement 09 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 2600.00</p>

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

7230.00

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



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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.	Full Name (Last, First, Middle Initial) Toyota Financial Services Corp.	Transaction ID: D9074 Date of Disbursement 08 / 24 / 2009
	Mailing Address PO Box 9490	Amount of Each Disbursement this Period 786.49
	City Cedar Rapids State IA Zip Code 52409-9490	
	Purpose of Disbursement Car lease Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Toyota Motor Credit Co.	Transaction ID: D9075 Date of Disbursement 09 / 02 / 2009
	Mailing Address PO Box 221164	Amount of Each Disbursement this Period 786.49
	City Fairfax State VA Zip Code 20153-1164	
	Purpose of Disbursement Car lease Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Toyota Motor Credit Co.	Transaction ID: D9076 Date of Disbursement 07 / 31 / 2009
	Mailing Address PO Box 221164	Amount of Each Disbursement this Period 786.49
	City Fairfax State VA Zip Code 20153-1164	
	Purpose of Disbursement Car lease Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2359.47
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 58 / 85

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.

Full Name (Last, First, Middle Initial)  
Toyota Motor Credit Co.

Transaction ID: D9077

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	0	9

Mailing Address PO Box 221164

Amount of Each Disbursement this Period

786.49
--------

City State Zip Code  
Fairfax VA 20153-1164

Purpose of Disbursement  
Car lease

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Verizon

Transaction ID: D9083

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	0	9

Mailing Address PO Box 27783

Amount of Each Disbursement this Period

181.59
--------

City State Zip Code  
Richmond VA 23261-7783

Purpose of Disbursement  
Telephone expense

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Verizon

Transaction ID: D9084

Date of Disbursement

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

Mailing Address PO Box 27783

Amount of Each Disbursement this Period

187.71
--------

City State Zip Code  
Richmond VA 23261-7783

Purpose of Disbursement  
Telephone expense

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

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

1155.79
---------

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

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# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.	Full Name (Last, First, Middle Initial) Verizon Mailing Address PO Box 27783 City Richmond State VA Zip Code 23261-7783 Purpose of Disbursement Telephone expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9085 Date of Disbursement 07 / 20 / 2009 Amount of Each Disbursement this Period 190.18 Category/Type
B.	Full Name (Last, First, Middle Initial) Virginia Commerce Bank Mailing Address 5350 Lee Hwy City Arlington State VA Zip Code 22207-1608 Purpose of Disbursement Payroll taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9086 Date of Disbursement 08 / 01 / 2009 Amount of Each Disbursement this Period 2827.00 Category/Type
C.	Full Name (Last, First, Middle Initial) Virginia Commerce Bank Mailing Address 5350 Lee Hwy City Arlington State VA Zip Code 22207-1608 Purpose of Disbursement Payroll taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9087 Date of Disbursement 07 / 01 / 2009 Amount of Each Disbursement this Period 2827.00 Category/Type

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

**5844.18**

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.	Full Name (Last, First, Middle Initial) Virginia Commerce Bank	Transaction ID: D9088 Date of Disbursement 07 / 03 / 2009
	Mailing Address 5350 Lee Hwy	Amount of Each Disbursement this Period 5.00
	City Arlington State VA Zip Code 22207-1608	
	Purpose of Disbursement Service fee Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Virginia Commerce Bank	Transaction ID: D9089 Date of Disbursement 09 / 01 / 2009
	Mailing Address 5350 Lee Hwy	Amount of Each Disbursement this Period 2827.00
	City Arlington State VA Zip Code 22207-1608	
	Purpose of Disbursement Payroll taxes Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Virginia Department of Taxation	Transaction ID: D9090 Date of Disbursement 07 / 01 / 2009
	Mailing Address PO Box 27264	Amount of Each Disbursement this Period 510.00
	City Richmond State VA Zip Code 23261-7264	
	Purpose of Disbursement Payroll taxes Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3342.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.	Full Name (Last, First, Middle Initial) Virginia Department of Taxation	Transaction ID: D9091 Date of Disbursement 08 / 01 / 2009
	Mailing Address PO Box 27264	Amount of Each Disbursement this Period 510.00
	City Richmond State VA Zip Code 23261-7264	
	Purpose of Disbursement Payroll taxes Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Washington Express	Transaction ID: D9093 Date of Disbursement 07 / 17 / 2009
	Mailing Address 12240 Indian Creek Ct Ste 100	Amount of Each Disbursement this Period 18.46
	City Beltsville State MD Zip Code 20705-1242	
	Purpose of Disbursement Courier Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Washington Express	Transaction ID: D9094 Date of Disbursement 08 / 12 / 2009
	Mailing Address 12240 Indian Creek Ct Ste 100	Amount of Each Disbursement this Period 48.16
	City Beltsville State MD Zip Code 20705-1242	
	Purpose of Disbursement Courier Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	576.62
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.	Full Name (Last, First, Middle Initial) Willard Inter-Continental	Transaction ID: D9098 Date of Disbursement																			
	Mailing Address 1401 Pennsylvania Ave NW	<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>8</td><td></td><td>1</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	8		1	2		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	2		2	0	0	9												
	City Washington State DC Zip Code 20004-1047	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Fundraising event deposit	<table border="1"><tr><td>1200.00</td></tr></table>	1200.00																		
1200.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) Winpisinger & Associates, Inc.	Transaction ID: D9099 Date of Disbursement																			
	Mailing Address 315 Inspiration Ln	<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>7</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	7		1	7		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	7		2	0	0	9												
	City Gaithersburg State MD Zip Code 20878-5808	Amount of Each Disbursement this Period																			
	Purpose of Disbursement FEC Preparation	<table border="1"><tr><td>2019.09</td></tr></table>	2019.09																		
2019.09																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) Winpisinger & Associates, Inc.	Transaction ID: D9100 Date of Disbursement																			
	Mailing Address 315 Inspiration Ln	<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>9</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	9		0	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	1		2	0	0	9												
	City Gaithersburg State MD Zip Code 20878-5808	Amount of Each Disbursement this Period																			
	Purpose of Disbursement FEC Preparation	<table border="1"><tr><td>1021.01</td></tr></table>	1021.01																		
1021.01																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>4240.10</td></tr></table>	4240.10
4240.10		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 53609</p> <p>City Phoenix State AZ Zip Code 85072-3609</p> <p>Purpose of Disbursement Credit card (see below)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D8929</p> <p>Date of Disbursement 09 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 393.21</p> <p>Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Charlie Palmer Steak House</p> <p>Mailing Address 101 Constitution Ave NW</p> <p>City Washington State DC Zip Code 20001-2133</p> <p>Purpose of Disbursement Fundraising/catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D8965</p> <p>Date of Disbursement 09 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 350.00</p> <p>[MEMO ITEM]</p> <p>Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Federal Express</p> <p>Mailing Address P.O. Box 1140</p> <p>City Memphis State TN Zip Code 38101</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D8988</p> <p>Date of Disbursement 09 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 22.82</p> <p>[MEMO ITEM]</p> <p>Category/Type</p>

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

393.21

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Federal Express Mailing Address P.O. Box 1140 City Memphis State TN Zip Code 38101 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D8992 Date of Disbursement 09 / 29 / 2009 Amount of Each Disbursement this Period 20.39 [MEMO ITEM]	
<b>B.</b>	Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 53609 City Phoenix State AZ Zip Code 85072-3609 Purpose of Disbursement Credit card (see below) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D8930 Date of Disbursement 07 / 01 / 2009 Amount of Each Disbursement this Period 15523.06	
<b>C.</b>	Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 53609 City Phoenix State AZ Zip Code 85072-3609 Purpose of Disbursement Service fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D8931 Date of Disbursement 07 / 01 / 2009 Amount of Each Disbursement this Period 10.00 [MEMO ITEM]	

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

15523.06

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: D8997 Date of Disbursement
	Mailing Address P.O. Box 1140	<input type="text" value="07"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City Memphis State TN Zip Code 38101	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="19.33"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: D8998 Date of Disbursement
	Mailing Address P.O. Box 1140	<input type="text" value="07"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City Memphis State TN Zip Code 38101	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="19.33"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: D8999 Date of Disbursement
	Mailing Address P.O. Box 1140	<input type="text" value="07"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City Memphis State TN Zip Code 38101	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="19.33"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	[MEMO ITEM]

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: D9000 Date of Disbursement
	Mailing Address P.O. Box 1140	<input type="text" value="07"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Memphis State TN Zip Code 38101	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="21.64"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: D8995 Date of Disbursement
	Mailing Address P.O. Box 1140	<input type="text" value="07"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Memphis State TN Zip Code 38101	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="77.32"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: D8989 Date of Disbursement
	Mailing Address P.O. Box 1140	<input type="text" value="07"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Memphis State TN Zip Code 38101	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="48.03"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	[MEMO ITEM]

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.

Full Name (Last, First, Middle Initial)  
Federal Express

Transaction ID: D8990  
Date of Disbursement

Mailing Address P.O. Box 1140

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	0	9

City State Zip Code  
Memphis TN 38101

Amount of Each Disbursement this Period

21.64
-------

Purpose of Disbursement  
Shipping

Category/ Type
-------------------

Candidate Name

[MEMO ITEM]

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

B.

Full Name (Last, First, Middle Initial)  
Federal Express

Transaction ID: D8991  
Date of Disbursement

Mailing Address P.O. Box 1140

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	0	9

City State Zip Code  
Memphis TN 38101

Amount of Each Disbursement this Period

30.92
-------

Purpose of Disbursement  
Shipping

Category/ Type
-------------------

Candidate Name

[MEMO ITEM]

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

C.

Full Name (Last, First, Middle Initial)  
American Express

Transaction ID: D8932  
Date of Disbursement

Mailing Address PO Box 53609

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	7		2	0	0	9

City State Zip Code  
Phoenix AZ 85072-3609

Amount of Each Disbursement this Period

78.04
-------

Purpose of Disbursement  
Credit card (see below)

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

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

78.04
-------

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: D8986 Date of Disbursement
	Mailing Address P.O. Box 1140	<input type="text" value="08"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City Memphis State TN Zip Code 38101	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="78.04"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: D8933 Date of Disbursement
	Mailing Address PO Box 53609	<input type="text" value="07"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Phoenix State AZ Zip Code 85072-3609	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit card (see below)	<input type="text" value="2371.40"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bistro Bis	Transaction ID: D8947 Date of Disbursement
	Mailing Address 15 E St NW	<input type="text" value="07"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20001-1501	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising/Catering	<input type="text" value="819.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2371.40"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: D8987 Date of Disbursement
	Mailing Address P.O. Box 1140	<input type="text" value="07"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Memphis State TN Zip Code 38101	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="21.95"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: D8996 Date of Disbursement
	Mailing Address P.O. Box 1140	<input type="text" value="07"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Memphis State TN Zip Code 38101	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="19.33"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: D8993 Date of Disbursement
	Mailing Address P.O. Box 1140	<input type="text" value="07"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Memphis State TN Zip Code 38101	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="21.64"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Federal Express Mailing Address P.O. Box 1140 City Memphis State TN Zip Code 38101 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D8994 Date of Disbursement 07 / 24 / 2009
	Amount of Each Disbursement this Period 19.33	[MEMO ITEM]
	Category/Type	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>B.</b> Full Name (Last, First, Middle Initial) Ritz-Carlton Pentagon City Mailing Address 1250 S Hayes St City Arlington State VA Zip Code 22202-5000 Purpose of Disbursement Meeting expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9052 Date of Disbursement 07 / 24 / 2009
	Amount of Each Disbursement this Period 150.44	[MEMO ITEM]
	Category/Type	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>C.</b> Full Name (Last, First, Middle Initial) Washington Nationals Mailing Address 1500 South Capitol Street, SE City Washington State DC Zip Code 20003 Purpose of Disbursement Fundraising event expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9095 Date of Disbursement 07 / 24 / 2009
	Amount of Each Disbursement this Period 150.00	[MEMO ITEM]
	Category/Type	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Washington Nationals Mailing Address 1500 South Capitol Street, SE City Washington State DC Zip Code 20003 Purpose of Disbursement Fundraising event expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9096 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 1121.34
	[MEMO ITEM]
	Category/ Type

<b>B.</b> Full Name (Last, First, Middle Initial) Comcast Mailing Address PO Box 827554 City Philadelphia State PA Zip Code 19182-7554 Purpose of Disbursement Cable Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D8973 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 99.95
	[MEMO ITEM]
	Category/ Type

<b>C.</b> Full Name (Last, First, Middle Initial) National Theatre Mailing Address Pennsylvania Avenue, NW City Washington State DC Zip Code 20005 Purpose of Disbursement Fundraising/Theater tickets Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9045 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 15054.00
	[MEMO ITEM]
	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	99.95
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.	Full Name (Last, First, Middle Initial) Bryan W. Spoon	Transaction ID: D8952 Date of Disbursement 07 / 14 / 2009
	Mailing Address 820 N. Cleveland Street	Amount of Each Disbursement this Period 77.61
	City Arlington State VA Zip Code 22201	
	Purpose of Disbursement Website hosting reimbursement Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Business Card	Transaction ID: D8954 Date of Disbursement 07 / 17 / 2009
	Mailing Address PO Box 15710	Amount of Each Disbursement this Period 1547.58
	City Wilmington State DE Zip Code 19886-5710	
	Purpose of Disbursement Credit card (see below) Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Books-A-Million	Transaction ID: D8950 Date of Disbursement 07 / 17 / 2009
	Mailing Address 4017 28th St S	Amount of Each Disbursement this Period 204.38
	City Arlington State VA Zip Code 22206-2201	
	Purpose of Disbursement Reference materials Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1625.19
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.	Full Name (Last, First, Middle Initial) Exxon Mobil	Transaction ID: D8983 Date of Disbursement 07 / 17 / 2009
	Mailing Address Various Stations	Amount of Each Disbursement this Period 33.02
	City Arlington State VA Zip Code 22201	
	Purpose of Disbursement Gas	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Exxon Mobil	Transaction ID: D8984 Date of Disbursement 07 / 17 / 2009
	Mailing Address Various Stations	Amount of Each Disbursement this Period 38.01
	City Arlington State VA Zip Code 22201	
	Purpose of Disbursement Gas	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Members Dining Room	Transaction ID: D9038 Date of Disbursement 07 / 17 / 2009
	Mailing Address US CAPITOL	Amount of Each Disbursement this Period 150.65
	City Washington State DC Zip Code 20515-0001	
	Purpose of Disbursement Meal	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.	Full Name (Last, First, Middle Initial) Members Dining Room	Transaction ID: D9040 Date of Disbursement 07 / 17 / 2009
	Mailing Address US CAPITOL	Amount of Each Disbursement this Period 40.00
	City Washington State DC Zip Code 20515-0001	
	Purpose of Disbursement Meal Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Members Dining Room	Transaction ID: D9042 Date of Disbursement 07 / 17 / 2009
	Mailing Address US CAPITOL	Amount of Each Disbursement this Period 27.85
	City Washington State DC Zip Code 20515-0001	
	Purpose of Disbursement Meal Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Sangam Restaurant	Transaction ID: D9055 Date of Disbursement 07 / 17 / 2009
	Mailing Address 1211 N Glebe Rd	Amount of Each Disbursement this Period 655.50
	City Arlington State VA Zip Code 22201-4800	
	Purpose of Disbursement Delegation Dinner Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.

Full Name (Last, First, Middle Initial)  
Business Card

Mailing Address PO Box 15710

City Wilmington State DE Zip Code 19886-5710

Purpose of Disbursement  
Credit card (see below)

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D8955  
Date of Disbursement

08 / 12 / 2009

Amount of Each Disbursement this Period

1674.93

B.

Full Name (Last, First, Middle Initial)  
Alexandria Toyota

Mailing Address 1707 Mount Vernon Ave

City Alexandria State VA Zip Code 22301-1721

Purpose of Disbursement  
Auto repair

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D9020  
Date of Disbursement

09 / 16 / 2009

Amount of Each Disbursement this Period

315.89

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
AT&T Mobility

Mailing Address PO Box 536216

City Atlanta State GA Zip Code 30353-6216

Purpose of Disbursement  
Telephone expense

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D8940  
Date of Disbursement

09 / 16 / 2009

Amount of Each Disbursement this Period

31.49

[MEMO ITEM]

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

1674.93

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.	Full Name (Last, First, Middle Initial) Capri Restaurant <hr/> Mailing Address 6825 Redmond Drive <hr/> City McLean State VA Zip Code 22101 <hr/> Purpose of Disbursement Meal Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D8959 Date of Disbursement 09 / 16 / 2009 <hr/> Amount of Each Disbursement this Period 115.00 <hr/> [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Hunter's Head LC <hr/> Mailing Address 9048 John S. Mosby Hwy <hr/> City Upperville State VA Zip Code 20184 <hr/> Purpose of Disbursement Meal Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9019 Date of Disbursement 09 / 16 / 2009 <hr/> Amount of Each Disbursement this Period 209.00 <hr/> [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Members Dining Room <hr/> Mailing Address US CAPITOL <hr/> City Washington State DC Zip Code 20515-0001 <hr/> Purpose of Disbursement Meal Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9043 Date of Disbursement 09 / 16 / 2009 <hr/> Amount of Each Disbursement this Period 47.15 <hr/> [MEMO ITEM]

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

0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.

Full Name (Last, First, Middle Initial)  
Members Dining Room

Mailing Address US CAPITOL

City Washington State DC Zip Code 20515-0001

Purpose of Disbursement  
Meal

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D9041  
Date of Disbursement

09 / 16 / 2009

Amount of Each Disbursement this Period

83.90

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Members Dining Room

Mailing Address US CAPITOL

City Washington State DC Zip Code 20515-0001

Purpose of Disbursement  
Meal

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D9039  
Date of Disbursement

09 / 16 / 2009

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Business Card

Mailing Address PO Box 15710

City Wilmington State DE Zip Code 19886-5710

Purpose of Disbursement  
Credit card (see below)

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D8957  
Date of Disbursement

09 / 16 / 2009

Amount of Each Disbursement this Period

1433.41

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

1433.41

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Border's Books Mailing Address 5871 Crossroads Center Way City Falls Church State VA Zip Code 22041-2307 Purpose of Disbursement Reference/reading materials Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D8951 Date of Disbursement 09 / 16 / 2009
	Amount of Each Disbursement this Period 241.42 [MEMO ITEM]

<b>B.</b> Full Name (Last, First, Middle Initial) Business Card Mailing Address PO Box 15710 City Wilmington State DE Zip Code 19886-5710 Purpose of Disbursement Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D8956 Date of Disbursement 09 / 16 / 2009
	Amount of Each Disbursement this Period 24.10 [MEMO ITEM]

<b>C.</b> Full Name (Last, First, Middle Initial) Exxon Mobil Mailing Address Various Stations City Arlington State VA Zip Code 22201 Purpose of Disbursement Gas Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D8982 Date of Disbursement 09 / 16 / 2009
	Amount of Each Disbursement this Period 41.01 [MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.

Full Name (Last, First, Middle Initial)  
JetBlue

Mailing Address 118-29 Queens Blvd.

City State Zip Code  
Forest Hills NY 11375

Purpose of Disbursement  
Travel/Airfare

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D9028  
Date of Disbursement

09 / 16 / 2009

Amount of Each Disbursement this Period

339.20

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
The Majestic

Mailing Address 911 King St

City State Zip Code  
Alexandria VA 22314

Purpose of Disbursement  
Meal

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D9068  
Date of Disbursement

09 / 16 / 2009

Amount of Each Disbursement this Period

365.07

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
United Airlines

Mailing Address PO Box 66100

City State Zip Code  
Chicago IL 60666-0100

Purpose of Disbursement  
Travel/Airfare

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D9081  
Date of Disbursement

09 / 16 / 2009

Amount of Each Disbursement this Period

62.94

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) United Airlines Mailing Address PO Box 66100 City Chicago State IL Zip Code 60666-0100 Purpose of Disbursement Travel/Airfare Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9082 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 9
	Amount of Each Disbursement this Period 70.00
	[MEMO ITEM]
	Category/ Type

<b>B.</b> Full Name (Last, First, Middle Initial) Joseph Easton Mailing Address 4400 Lee Highway #207 City Arlington State VA Zip Code 22207 Purpose of Disbursement Travel reimbursement (see below) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9033 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 9
	Amount of Each Disbursement this Period 358.78
	[MEMO ITEM]
	Category/ Type

<b>C.</b> Full Name (Last, First, Middle Initial) Southwest Airlines Mailing Address PO Box 36647 City Dallas State TX Zip Code 75235-1647 Purpose of Disbursement Travel/Airfare Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D9058 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 9
	Amount of Each Disbursement this Period 239.20
	[MEMO ITEM]
	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	358.78
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.

Full Name (Last, First, Middle Initial)  
Mary Moran

Transaction ID: D9036  
Date of Disbursement

Mailing Address 909 E. Madison Street

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

City Arlington State VA Zip Code 22205

Amount of Each Disbursement this Period

1452.22
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Purpose of Disbursement  
Fundraising expenses (see below)

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Petty Cash

Transaction ID: D9048  
Date of Disbursement

Mailing Address 311 North Washington Street  
#200L

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

City Alexandria State VA Zip Code 22314

Amount of Each Disbursement this Period

10.00
-------

Purpose of Disbursement  
Quarters for guest parking

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Royce Flowers

Transaction ID: D9054  
Date of Disbursement

Mailing Address 2205 Mount Vernon Ave

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

City Alexandria State VA Zip Code 22301

Amount of Each Disbursement this Period

100.00
--------

Purpose of Disbursement  
Flowers

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

[MEMO ITEM]

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

1452.22
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TOTAL This Period (last page this line number only) .....

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# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) U.S. Postmaster</p> <p>Mailing Address 1908 Mount Vernon Ave</p> <p>City Alexandria State VA Zip Code 22301-1300</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>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D9078</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="26.40"/></p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) U.S. Postmaster</p> <p>Mailing Address 1908 Mount Vernon Ave</p> <p>City Alexandria State VA Zip Code 22301-1300</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>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D9079</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1260.60"/></p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) U.S. Postmaster</p> <p>Mailing Address 1908 Mount Vernon Ave</p> <p>City Alexandria State VA Zip Code 22301-1300</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>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D9080</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="17.60"/></p> <p><b>[MEMO ITEM]</b></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="86610.67"/>



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Paul Nichols for Delegate</p> <p>Mailing Address 12660 Lake Ridge Drive</p> <p>City Woodbridge State VA Zip Code 22192</p> <p>Purpose of Disbursement Non-Federal Contribution</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>Transaction ID:</b> D9047</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) ROB MILLER FOR CONGRESS</p> <p>Mailing Address 219 Scott's Street</p> <p>City Beaufort State SC Zip Code 29902</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Robert L. Miller</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: SC District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D408190</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) VIRGINIA PARTISANS POLITICAL ACTION COMMITTEE</p> <p>Mailing Address POST OFFICE BOX 6243</p> <p>City ARLINGTON State VA Zip Code 22206</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name VIRGINIA PARTISANS POLITICAL ACTION COMMITTEE</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>Transaction ID:</b> D9101</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p>

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

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 85 / 85

<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input checked="" type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Moran for Congress

A.

Full Name (Last, First, Middle Initial)  
Holy Cross Development

Mailing Address 1 College Avenue

City Worcester State MA Zip Code 01610

Purpose of Disbursement  
Donation

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D9017

Date of Disbursement

<sup>M</sup>	<sup>M</sup>	/	<sup>D</sup>	<sup>D</sup>	/	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>
0	9		1	6		2	0	0	9

Amount of Each Disbursement this Period

500.00
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[MEMO ITEM]

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

0.00
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TOTAL This Period (last page this line number only) ..... ▶

1900.00
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