

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Democratic State Central Committee of Maryland

ADDRESS (number and street) 188 Main Street, Suite 1  
 Check if different than previously reported. (ACC)  
Annapolis MD 21401

2. **FEC IDENTIFICATION NUMBER** C00141812  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on 10 23 2008 in the State of MD  
(d) 30-Day **Post -Election** Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on in the State of

5. Covering Period 10 01 2008 through 10 15 2008

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 Kenneth Banks

Signature of Treasurer Electronically Filed by Kenneth Banks Date 10 23 2008

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

Office Use Only									
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Democratic State Central Committee of Maryland

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		30615.81
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	232045.99									
(c) Total Receipts (from Line 19) .....	238405.00	1440655.72								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	470450.99	1471271.53								
7. Total Disbursements (from Line 31) .....	212291.95	1213112.49								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	258159.04	258159.04								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Democratic State Central Committee of Maryland

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	34086.00	345999.50
(i) Itemized (use Schedule A) .....	22643.00	262088.69
(ii) Unitemized .....	56729.00	608088.19
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	6200.00
(b) Political Party Committees .....	111000.00	297900.00
(c) Other Political Committees (such as PACs) .....	167729.00	912188.19
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	70676.00	372009.53
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	711.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	24.38
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	155722.62
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	155722.62
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	238405.00	1440655.72
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	238405.00	1284933.10

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	12252.10	101018.91
(ii) Non-Federal Share.....	14429.20	239298.19
(b) Other Federal Operating Expenditures.....	2094.21	174513.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	28775.51	514830.35
22. Transfers to Affiliated/Other Party Committees.....	0.00	29700.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	7744.44	19636.70
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	10000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	5000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	15000.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	175772.00	633945.44
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	175772.00	633945.44
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	212291.95	1213112.49
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	197862.75	973814.30

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	167729.00	912188.19
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	15000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	167729.00	897188.19
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	14346.31	275532.16
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	711.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	14346.31	274821.16

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 48  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.** Full Name (Last, First, Middle Initial)  
Guadalupe F Aguirre

Mailing Address 12801 Bushey Drive

City State Zip Code  
Silver Spring MD 20906

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY  
10 / 02 / 2008

**Transaction ID:** C1334247

Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
Stacey Suzanne Aucoin Baca

Mailing Address 8408 49th Avenue

City State Zip Code  
College Park MD 20740-2410

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
St of Maryland Legislative Aide

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY  
10 / 01 / 2008

**Transaction ID:** C1319121

Amount of Each Receipt this Period 200.00

**C.** Full Name (Last, First, Middle Initial)  
Stacey Suzanne Aucoin Baca

Mailing Address 8408 49th Avenue

City State Zip Code  
College Park MD 20740-2410

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
St of Maryland Legislative Aide

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY  
10 / 03 / 2008

**Transaction ID:** C1326346

Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... 400.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 48  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.**

Full Name (Last, First, Middle Initial) Ura Bailey		Date of Receipt MM / DD / YYYY 10 / 01 / 2008
Mailing Address 517 Ellworth Drive		<b>Transaction ID:</b> C1319360
City Silver Spring	State MD	Zip Code 20910
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Howard University	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**B.**

Full Name (Last, First, Middle Initial) Muriel V. Berkeley		Date of Receipt MM / DD / YYYY 10 / 01 / 2008
Mailing Address 301 Northfield Place		<b>Transaction ID:</b> C1334503
City Baltimore	State MD	Zip Code 21210
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer Baltimore Curriculum Project	Occupation Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

**C.**

Full Name (Last, First, Middle Initial) Constance R. Caplan		Date of Receipt MM / DD / YYYY 10 / 06 / 2008
Mailing Address 701 Cathedral Street		<b>Transaction ID:</b> C1327519
City Baltimore	State MD	Zip Code 21201
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer The Time Group, Inc.	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1350.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 48

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.**

Full Name (Last, First, Middle Initial)  
Rita Carrier

Mailing Address 6664 Hillandale Road

City State Zip Code  
Chevy Chase MD 20815

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

Name of Employer Occupation  
Sullivan & Cromwell Attorney

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

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 4 / 2 0 0 8

Transaction ID: C1327557

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Allan Charles

Mailing Address 900 South Wolfe Street

City State Zip Code  
Baltimore MD 21231

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

Name of Employer Occupation  
Trahanm Burden & Charles, Inc. Advertising

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 4 / 2 0 0 8

Transaction ID: C1327562

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)  
Armond Darrin

Mailing Address 3981 Littlestown Pike

City State Zip Code  
Westminster MD 21158

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

Name of Employer Occupation  
DCMA Program Manager

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

Date of Receipt

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

Transaction ID: C1326353

Amount of Each Receipt this Period

250.00

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

6250.00

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 48  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<p><b>A.</b> Full Name (Last, First, Middle Initial) Harold M Davidson</p> <p>Mailing Address 5301 Westbard Circle # 350</p> <p>City State Zip Code Bethesda MD 20816</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 DHHS Occupation Administrator</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">220.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p><b>Transaction ID:</b> C1334516</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">100.00</span></p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	1	/	2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	0	1	/	2	0	0	8												

<p><b>B.</b> Full Name (Last, First, Middle Initial) Edward C Edelenbos</p> <p>Mailing Address 4017 Parkside Drive</p> <p>City State Zip Code Baltimore MD 21206</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 Self Occupation Homemaker</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">225.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p><b>Transaction ID:</b> C1334279</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">50.00</span></p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	2	/	2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	0	2	/	2	0	0	8												

<p><b>C.</b> Full Name (Last, First, Middle Initial) Lee Finney</p> <p>Mailing Address 670 Americana Drive #16</p> <p>City State Zip Code Annapolis MD 21403-3121</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 Retired - IEDA Occupation Retired</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">325.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p><b>Transaction ID:</b> C1327500</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">250.00</span></p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	5	/	2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	1	5	/	2	0	0	8												

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">400.00</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 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 48
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A.</b>	Full Name (Last, First, Middle Initial) Sarah C. Flynn		Date of Receipt
	Mailing Address 3120 Munz Drive		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Annapolis	MD	21403
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer self		Occupation	Transaction ID: C1327501
		book editor	
Receipt For:		Aggregate Year-to-Date	
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="525.00"/>	Amount of Each Receipt this Period
<input type="checkbox"/> Other (specify) ▼			<input type="text" value="250.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Pradeep Ganguly		Date of Receipt
	Mailing Address 12001 Lilium Lane		<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Glenn Dale	MD	20769
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Montgomery County Governm-ent		Occupation	Transaction ID: C1319414
		Economic Development	
Receipt For:		Aggregate Year-to-Date	
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="1000.00"/>	Amount of Each Receipt this Period
<input type="checkbox"/> Other (specify) ▼			<input type="text" value="1000.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Greenebaum		Date of Receipt
	Mailing Address 8548 Leisure Hill Drive		<input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Pikesville	MD	21208
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Greenebaum & Rose Associa-tes		Occupation	Transaction ID: C1326683
		Real Estate	
Receipt For:		Aggregate Year-to-Date	
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="5000.00"/>	Amount of Each Receipt this Period
<input type="checkbox"/> Other (specify) ▼			<input type="text" value="5000.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="6250.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 48  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.**

Full Name (Last, First, Middle Initial) Patricia Heck		Date of Receipt MM / DD / YYYY 10 / 09 / 2008
Mailing Address 4200 Fernrock Lane		<b>Transaction ID:</b> C1326944
City Keedysville	State MD	Zip Code 21756
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer retired	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

**B.**

Full Name (Last, First, Middle Initial) Diane M Hurd		Date of Receipt MM / DD / YYYY 10 / 01 / 2008
Mailing Address 118 Carroll Drive		<b>Transaction ID:</b> C1334408
City Annapolis	State MD	Zip Code 21403
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Anne Arundel County Public Schools	Occupation Teaching Assistant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**C.**

Full Name (Last, First, Middle Initial) Fred Israel		Date of Receipt MM / DD / YYYY 10 / 09 / 2008
Mailing Address PO Box 69		<b>Transaction ID:</b> C1327559
City Royal Oak	State MD	Zip Code 21662
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer retired	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5300.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A.</b>	Full Name (Last, First, Middle Initial) Ann L Jackson	Date of Receipt MM / DD / YYYY 10 / 02 / 2008
	Mailing Address 333 Prince George Street	<b>Transaction ID:</b> C1334293
	City State Zip Code Laurel MD 20707	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Joseph Jacobs	Date of Receipt MM / DD / YYYY 10 / 01 / 2008
	Mailing Address 11629 Brandy Hall Lane	<b>Transaction ID:</b> C1334391
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 108.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self Occupation Artist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 318.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Gloria T Johnson	Date of Receipt MM / DD / YYYY 10 / 01 / 2008
	Mailing Address 6706 Edgemere Drive	<b>Transaction ID:</b> C1334438
	City State Zip Code Temple Hills MD 20748	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	308.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 48

(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.**

Full Name (Last, First, Middle Initial)  
Law Office of John P McDonough LLC

Mailing Address 4403 Woodgate Way

City State Zip Code  
Bowie MD 20720

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt

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

Transaction ID: C1326665

Amount of Each Receipt this Period

1000.00

See John McDonough

**B.**

Full Name (Last, First, Middle Initial)  
Joan Marie Lawrence

Mailing Address 19405 Heron Cove Lane

City State Zip Code  
Drayden MD 20630

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

Name of Employer Occupation  
Self Artist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt

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

Transaction ID: C1334415

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
Richard Lewin

Mailing Address 4401 Greenway

City State Zip Code  
Baltimore MD 21218

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

Name of Employer Occupation  
Md. State Government Supervisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 4 / 2 0 0 8

Transaction ID: C1327563

Amount of Each Receipt this Period

500.00

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

1600.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 48		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A.</b>	Full Name (Last, First, Middle Initial) Aris Mardirossian	Date of Receipt MM / DD / YYYY 10 / 01 / 2008
	Mailing Address 11940 River Road	<b>Transaction ID:</b> C1319416
	City State Zip Code Potomac MD 20854	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer self Occupation Developer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 2000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Salima Siler Marriott	Date of Receipt MM / DD / YYYY 10 / 01 / 2008
	Mailing Address 4515 Homer Avenue	<b>Transaction ID:</b> C1319354
	City State Zip Code Baltimore MD 21215	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer City of Baltimore Occupation Deputy Mayor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) John McDonough	Date of Receipt MM / DD / YYYY 10 / 09 / 2008
	Mailing Address 4403 Woodgate Way	<b>Transaction ID:</b> C1326678
	City State Zip Code Mitchellville MD 20720	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1000.00	<b>[MEMO ITEM]</b> * see Law Offices of J Mc-Donough LLC

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2250.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 48

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.**

Full Name (Last, First, Middle Initial)  
Maggie McIntosh

Mailing Address 3957 Cloverhill Road

City State Zip Code  
Baltimore MD 21218

FEC ID number of contributing federal political committee. C

Name of Employer State of Maryland Occupation State Delegate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt  

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

**Transaction ID:** C1319117

Amount of Each Receipt this Period  
25.00

**B.**

Full Name (Last, First, Middle Initial)  
Maggie McIntosh

Mailing Address 3957 Cloverhill Road

City State Zip Code  
Baltimore MD 21218

FEC ID number of contributing federal political committee. C

Name of Employer State of Maryland Occupation State Delegate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt  

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

**Transaction ID:** C1326354

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
Leonard Moodispaw

Mailing Address 1158 Oakview Drive

City State Zip Code  
Crownsville MD 21032

FEC ID number of contributing federal political committee. C

Name of Employer Essex Corporation Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  

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

**Transaction ID:** C1319118

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1025.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 48

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.**

Full Name (Last, First, Middle Initial)  
Cathy Neuman

Mailing Address 10 Treadwell Court

City State Zip Code  
Lutherville Timoni MD 21093

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

Name of Employer Occupation  
IBM Consultant

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 0 8

Transaction ID: C1334672

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
Frances C Nyce

Mailing Address 121 Smith Avenue

City State Zip Code  
Westminster MD 21157

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

Name of Employer Occupation  
retired retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 310.00

Date of Receipt

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

Transaction ID: C1334380

Amount of Each Receipt this Period

85.00

**C.**

Full Name (Last, First, Middle Initial)  
Carol Pensky

Mailing Address 4821 West Street NW

City State Zip Code  
Washington DC 20007

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

Name of Employer Occupation  
Retired homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 650.00

Date of Receipt

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

Transaction ID: C1319352

Amount of Each Receipt this Period

500.00

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

1085.00

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 48  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.**

Full Name (Last, First, Middle Initial)  
Margaret Quinn

Mailing Address 26 Sparks Station Road

City Sparks State MD Zip Code 21152

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

Name of Employer: Quinn Gordon & Wolf Occupation: Paralegal

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 505.00

Date of Receipt: 10 / 14 / 2008

Transaction ID: C1327556

Amount of Each Receipt this Period: 75.00

**B.**

Full Name (Last, First, Middle Initial)  
Denise Riley

Mailing Address 4216 Queensbury Road

City Hyattsville State MD Zip Code 20781

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

Name of Employer: AFL-CIO Occupation: Political Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 10 / 01 / 2008

Transaction ID: C1319311

Amount of Each Receipt this Period: 25.00

**C.**

Full Name (Last, First, Middle Initial)  
Linda Robertson

Mailing Address 100 Harborview Drive

City Baltimore State MD Zip Code 21230

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

Name of Employer: Johns Hopkins University Occupation: Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 03 / 2008

Transaction ID: C1326356

Amount of Each Receipt this Period: 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **350.00**

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

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

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

FOR LINE NUMBER: PAGE 18 / 48  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

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

Mailing Address 8367 Hawkins Creamery Road

City Gaithersburg State MD Zip Code 20882

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 03 / 2008

**Transaction ID:** C1334278

Amount of Each Receipt this Period 200.00

**B.** Full Name (Last, First, Middle Initial)  
Terry M Rubenstein

Mailing Address 3206 Cave Road

City Owings Mills State MD Zip Code 21117

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

Name of Employer MAGNA PROPERTIES Occupation Founder

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 01 / 2008

**Transaction ID:** C1319107

Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
James Shea

Mailing Address 10909 Baronet Road

City Owings Mills State MD Zip Code 21117

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

Name of Employer Venable LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 09 / 2008

**Transaction ID:** C1327560

Amount of Each Receipt this Period 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6200.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 48

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.**

Full Name (Last, First, Middle Initial)  
Elizabeth A Shoffner

Mailing Address 1306 Green Pond Court

City State Zip Code  
Westminster MD 21157

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 208.00

Date of Receipt

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

Transaction ID: C1334478

Amount of Each Receipt this Period

108.00

**B.**

Full Name (Last, First, Middle Initial)  
James M. Voss

Mailing Address 25035 Pealiquour Road

City State Zip Code  
Denton MD 21629

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

Name of Employer Occupation  
Self / Retired Farmer

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 600.00

Date of Receipt

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

Transaction ID: C1319417

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
Paul F Wambach

Mailing Address 3 Manorvale Court

City State Zip Code  
Rockville MD 20853

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

Name of Employer Occupation  
U.S. Department of Energy Industrial Hygenist

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt

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

Transaction ID: C1334288

Amount of Each Receipt this Period

100.00

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

708.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 48

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.**

Full Name (Last, First, Middle Initial)  
Julia Washburn

Mailing Address 20 Hickory Avenue

City State Zip Code  
Takoma Park MD 20912

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

Name of Employer Self-Employed Occupation  
Self-Employed Mang Consulting

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

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

Transaction ID: C1334225

Amount of Each Receipt this Period

110.00

**B.**

Full Name (Last, First, Middle Initial)  
Julia Washburn

Mailing Address 20 Hickory Avenue

City State Zip Code  
Takoma Park MD 20912

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

Name of Employer Self-Employed Occupation  
Self-Employed Mang Consulting

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 6 / 2 0 0 8

Transaction ID: C1334321

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
Belinda Wilson

Mailing Address 359 Hartford Road

City State Zip Code  
South Orange NJ 07079-2432

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

Name of Employer Tapestry Entertainment Occupation  
Tapestry Entertainment Film Maker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 0 8

Transaction ID: C1326378

Amount of Each Receipt this Period

400.00

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

610.00

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

34086.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 48
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A.</b>	Full Name (Last, First, Middle Initial) AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED	Date of Receipt
	Mailing Address 1625 L STREET NW	<input type="text" value="10"/> / <input type="text" value="07"/> / <input type="text" value="2008"/>
	City State Zip Code WASHINGTON DC 20036	<b>Transaction ID:</b> C1326995
	FEC ID number of contributing federal political committee. <input type="text" value="C00011114"/>	Amount of Each Receipt this Period <input type="text" value="5000.00"/>
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) Friends of Ed Reisinger	Date of Receipt
	Mailing Address 1621 S Ellamont Street	<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2008"/>
	City State Zip Code Baltimore MD 21230	<b>Transaction ID:</b> C1326345
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="500.00"/>
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	Contrib from State Campaign acct

<b>C.</b>	Full Name (Last, First, Middle Initial) Friends of William Cole	Date of Receipt
	Mailing Address 1800 E Fort Avenue	<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2008"/>
	City State Zip Code Baltimore MD 21230	<b>Transaction ID:</b> C1326343
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="500.00"/>
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	contrib is from State campaign acct

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="6000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 22 / 48  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.** Full Name (Last, First, Middle Initial)  
Hoyer For Congress  
Mailing Address 4201 Northview Dr, Ste 307  
City State Zip Code  
Bowie MD 20716  
FEC ID number of contributing federal political committee. **C** C00140715  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 144500.00  
Date of Receipt M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 8  
Transaction ID: C1326983  
Amount of Each Receipt this Period 2000.00  
Transfer

**B.** Full Name (Last, First, Middle Initial)  
Hoyer For Congress  
Mailing Address 4201 Northview Dr, Ste 307  
City State Zip Code  
Bowie MD 20716  
FEC ID number of contributing federal political committee. **C** C00140715  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 144500.00  
Date of Receipt M M / D D / Y Y Y Y Y  
1 0 / 0 8 / 2 0 0 8  
Transaction ID: C1327001  
Amount of Each Receipt this Period 95000.00  
Transfer

**C.** Full Name (Last, First, Middle Initial)  
Kratovil for Congress  
Mailing Address 222 Main Sail Drive  
PO Box 518  
City State Zip Code  
Stevensville MD 21666  
FEC ID number of contributing federal political committee. **C** C00434936  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 3000.00  
Date of Receipt M M / D D / Y Y Y Y Y  
1 0 / 0 8 / 2 0 0 8  
Transaction ID: C1327003  
Amount of Each Receipt this Period 3000.00  
Transfer

**SUBTOTAL** of Receipts This Page (optional) ..... ► 100000.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 48  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

A.

Full Name (Last, First, Middle Initial)  
NEA FUND FOR CHILDREN AND PUBLIC EDUCATION

Mailing Address 1201 16th Street NW Suite 420

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00003251

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 6 / 2 0 0 8

Transaction ID: C1326368

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	111000.00

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

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

FOR LINE NUMBER: PAGE 24 / 48  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

**A.** Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street SE 2nd Fl

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00347864

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 145121.00

Date of Receipt: 10 / 02 / 2008  
**Transaction ID:** C1327565  
 Amount of Each Receipt this Period: 42338.00

Transfer

**B.** Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street SE 2nd Fl

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00347864

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 145121.00

Date of Receipt: 10 / 08 / 2008  
**Transaction ID:** C1327566  
 Amount of Each Receipt this Period: 27338.00

Transfer

**C.** Full Name (Last, First, Middle Initial)  
Montgomery County Democratic Central Committee

Mailing Address 3720 Farragut Avenue

City Kensington State MD Zip Code 20895

FEC ID number of contributing federal political committee. **C** C00009845

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3330.00

Date of Receipt: 10 / 09 / 2008  
**Transaction ID:** C1326917  
 Amount of Each Receipt this Period: 1000.00

Transfer

**SUBTOTAL** of Receipts This Page (optional) ..... ► **70676.00**

**TOTAL** This Period (last page this line number only) ..... ► **70676.00**



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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: D187891 Date of Disbursement
	Mailing Address 200 Vesey Street	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City New York State NY Zip Code 10285	Amount of Each Disbursement this Period
	Purpose of Disbursement bank fees	<input type="text" value="78.52"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: D194223 Date of Disbursement
	Mailing Address PO Box 27025	<input type="text" value="10"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Richmond State VA Zip Code 23261	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank fees	<input type="text" value="25.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: D187868 Date of Disbursement
	Mailing Address PO Box 27025	<input type="text" value="10"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Richmond State VA Zip Code 23261	Amount of Each Disbursement this Period
	Purpose of Disbursement bank fees	<input type="text" value="287.03"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="390.55"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address PO Box 27025</p> <p>City Richmond State VA Zip Code 23261</p> <p>Purpose of Disbursement bank fees</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> D194232</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address PO Box 27025</p> <p>City Richmond State VA Zip Code 23261</p> <p>Purpose of Disbursement bank fees</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> D187855</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="10.00"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address PO Box 27025</p> <p>City Richmond State VA Zip Code 23261</p> <p>Purpose of Disbursement bank fees</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> D187857</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="10.00"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="70.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) City National Bank</p> <p>Mailing Address 2029 Century Park East, B Level</p> <p>City Los Angeles State CA Zip Code 90067</p> <p>Purpose of Disbursement Bank fees</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D187858</p> <p>Date of Disbursement 10 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 279.30</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) City National Bank</p> <p>Mailing Address 2029 Century Park East, B Level</p> <p>City Los Angeles State CA Zip Code 90067</p> <p>Purpose of Disbursement bank fees</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D187860</p> <p>Date of Disbursement 10 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 52.63</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) City National Bank</p> <p>Mailing Address 2029 Century Park East, B Level</p> <p>City Los Angeles State CA Zip Code 90067</p> <p>Purpose of Disbursement bank fees</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D187861</p> <p>Date of Disbursement 10 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 21.29</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>353.22</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

A.	Full Name (Last, First, Middle Initial) City National Bank	Transaction ID: D187863 Date of Disbursement
	Mailing Address 2029 Century Park East, B Level	<input type="text" value="10"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Los Angeles State CA Zip Code 90067	Amount of Each Disbursement this Period
	Purpose of Disbursement bank fees	<input type="text" value="36.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Icc Rents	Transaction ID: D194212 Date of Disbursement
	Mailing Address 2025 Glen Ellyn Road	<input type="text" value="10"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Glendale Heights State IL Zip Code 60139	Amount of Each Disbursement this Period
	Purpose of Disbursement computer rentals	<input type="text" value="361.99"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Icc Rents	Transaction ID: D194228 Date of Disbursement
	Mailing Address 2025 Glen Ellyn Road	<input type="text" value="10"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Glendale Heights State IL Zip Code 60139	Amount of Each Disbursement this Period
	Purpose of Disbursement computer rentals	<input type="text" value="882.45"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1280.44"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="2094.21"/>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 48

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Aaron Avarkotos</p> <p>Mailing Address 9 West 6th Street</p> <p>City Oswego State NY Zip Code 13126</p> <p>Purpose of Disbursement payroll</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> D194304</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1214.62"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address PO Box 27025</p> <p>City Richmond State VA Zip Code 23261</p> <p>Purpose of Disbursement payroll tax</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> D194310</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="11217.43"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Yuri Beckelman</p> <p>Mailing Address PO Box 518</p> <p>City Stevensville State MD Zip Code 21666</p> <p>Purpose of Disbursement payroll</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> D194305</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3169.41"/></p>

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<p><b>A.</b> Full Name (Last, First, Middle Initial) Meredith F. Bowman</p> <p>Mailing Address PO Box 8244</p> <p>City Elkridge State MD Zip Code 21075</p> <p>Purpose of Disbursement payroll</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> D194290</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2283.36"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mr. Jonathan Carpenter, Sr.</p> <p>Mailing Address PO Box 37</p> <p>City Queen Anne State MD Zip Code 21657</p> <p>Purpose of Disbursement payroll</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> D194299</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1067.22"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Enterprise Rent a Car</p> <p>Mailing Address 701 Wedeman Avenue</p> <p>City Linthicum Heights State MD Zip Code 21090</p> <p>Purpose of Disbursement deposit / GOTV Vans for election day</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> D194274</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5293.50"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="8644.08"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Fieldworks</p> <p>Mailing Address 2852 Connecticut Avenue</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Field organizing consultant service</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> D194272</p> <p>Date of Disbursement 10 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 7500.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Quincey Gamble</p> <p>Mailing Address 117 S Chapel Street</p> <p>City Baltimore State MD Zip Code 21231</p> <p>Purpose of Disbursement payroll</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> D194291</p> <p>Date of Disbursement 10 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 2758.13</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Danielle Hannah</p> <p>Mailing Address 5201 Hillwell Road</p> <p>City Baltimore State MD Zip Code 21229</p> <p>Purpose of Disbursement payroll</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> D194292</p> <p>Date of Disbursement 10 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 602.16</p>

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

10860.29

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A.</b> Full Name (Last, First, Middle Initial) David Hart <hr/> Mailing Address 4519 Cheltenham Drive <hr/> City Bethesda State MD Zip Code 20814 <hr/> Purpose of Disbursement payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D194300 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 783.03
	Category/ Type
	Frank Kratovil
<b>B.</b> Full Name (Last, First, Middle Initial) Hi Image Graphics <hr/> Mailing Address 10534 York Road # 103 <hr/> City Cockeysville State MD Zip Code 21030 <hr/> Purpose of Disbursement postage for exempt mail piece Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D194234 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 8
	Amount of Each Disbursement this Period 17798.94
	Category/ Type
	Frank Kratovil
<b>C.</b> Full Name (Last, First, Middle Initial) Judith Langley <hr/> Mailing Address 4983 Lockard Drive <hr/> City Owings Mills State MD Zip Code 21117 <hr/> Purpose of Disbursement payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D194301 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 1060.24
	Category/ Type
	Frank Kratovil

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	19642.21
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A.</b> Full Name (Last, First, Middle Initial) Susan T Levitan <hr/> Mailing Address 2650 Worrell Court <hr/> City Crofton State MD Zip Code 21114 <hr/> Purpose of Disbursement payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D194294 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 2435.62
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) John McIntyre <hr/> Mailing Address 3700 T Street NW <hr/> City Washington State DC Zip Code 20007 <hr/> Purpose of Disbursement payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D194306 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 1112.59
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. David R. Paulson <hr/> Mailing Address 5115 Wetheredsville Road <hr/> City Baltimore State MD Zip Code 21229 <hr/> Purpose of Disbursement payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D194295 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 2073.82
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5622.03
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A.</b> Full Name (Last, First, Middle Initial) Pr Promtions <hr/> Mailing Address PO Box 34407 <hr/> City Bethesda State MD Zip Code 20827 <hr/> Purpose of Disbursement exempt / Obama signs Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D194216 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 8
	Amount of Each Disbursement this Period 5512.00
	Category/ Type
	Category/ Type

<b>B.</b> Full Name (Last, First, Middle Initial) Clay Schramm <hr/> Mailing Address 2009 Harbour Gates Drive # 141 <hr/> City Annapolis State MD Zip Code 21401 <hr/> Purpose of Disbursement payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D194307 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 1385.25
	Category/ Type
	Category/ Type

<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Stacey Shade-Ware <hr/> Mailing Address 9036 Queen Maria Court <hr/> City Columbia State MD Zip Code 21045 <hr/> Purpose of Disbursement payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D194298 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 1014.35
	Category/ Type
	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7911.60
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 35 / 48

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<p><b>A.</b> Full Name (Last, First, Middle Initial) Patrice Stanley</p> <p>Mailing Address 5995 Windsor Road</p> <p>City Seaford State DE Zip Code 19973</p> <p>Purpose of Disbursement payroll</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> D194308</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1160.83"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Travis Tazelaar</p> <p>Mailing Address 40 S East Avenue</p> <p>City Baltimore State MD Zip Code 21224</p> <p>Purpose of Disbursement payroll</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> D194302</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1182.67"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Tru Blu Politics</p> <p>Mailing Address 10133 Maple Wood Drive</p> <p>City Ellicott City State MD Zip Code 21042</p> <p>Purpose of Disbursement exempt slate card handout</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> D194235</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3022.00"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="5365.50"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Tru Blu Politics</p> <p>Mailing Address 10133 Maple Wood Drive</p> <p>City Ellicott City State MD Zip Code 21042</p> <p>Purpose of Disbursement vol exempt Frank Kratovil mail piece</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D194233 <b>Date of Disbursement</b> 10 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 21642.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Tru Blu Politics</p> <p>Mailing Address 10133 Maple Wood Drive</p> <p>City Ellicott City State MD Zip Code 21042</p> <p>Purpose of Disbursement vol exempt Frank Kratovil mail piece</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D194227 <b>Date of Disbursement</b> 10 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 45087.65</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Curtis Valentine</p> <p>Mailing Address 7305 Riverhill Road</p> <p>City Oxon Hill State MD Zip Code 20745</p> <p>Purpose of Disbursement payroll</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D194303 <b>Date of Disbursement</b> 10 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 1013.70</p>

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

67743.35

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

A.	Full Name (Last, First, Middle Initial) Washington Printing and Promotions	Transaction ID: D194211 Date of Disbursement
	Mailing Address 5125 MacArthur Blvd NW	<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City Washington State DC Zip Code 20016	Amount of Each Disbursement this Period
	Purpose of Disbursement exempt materials Obama yard signs	<input type="text" value="11724.24"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Winning Connections	Transaction ID: D194218 Date of Disbursement
	Mailing Address 209 Pennsylvania Avenue SE	<input type="text" value="10"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement voter reg deadline Robo calls	<input type="text" value="1917.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

no reference to Fed Cand

C.	Full Name (Last, First, Middle Initial) Winning Connections	Transaction ID: D194219 Date of Disbursement
	Mailing Address 209 Pennsylvania Avenue SE	<input type="text" value="10"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement Blind ID calls	<input type="text" value="20740.24"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="34381.48"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="175772.00"/>

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Democratic State Central Committee of Maryland		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO  If YES, name the designating committee:	Full Name of Subordinate Committee Democratic State Central Committee of Maryland	
	Mailing Address 188 Main Street, Suite 1	
	City Annapolis	State ZIP Code MD 21401

Full Name (Last, First, Middle Initial) of Each Payee Icc Rents		Purpose of Expenditure Computers for Kratovil	<input type="text"/>
Mailing Address 2025 Glen Ellyn Road		Date MM / DD / YYYY 10 / 03 / 2008	Category/Type
City Glendale Heights	State ZIP Code IL 60139		
Name of Federal Candidate Supported Frank Kratovil	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	Amount 361.99	
Aggregate General Election Expenditure for this Candidate ▶ 13136.70 <b>Transaction ID: D194213</b>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

Full Name (Last, First, Middle Initial) of Each Payee Icc Rents		Purpose of Expenditure computers for Frank Kratovil	<input type="text"/>
Mailing Address 2025 Glen Ellyn Road		Date MM / DD / YYYY 10 / 08 / 2008	Category/Type
City Glendale Heights	State ZIP Code IL 60139		
Name of Federal Candidate Supported Frank Kratovil	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	Amount 882.45	
Aggregate General Election Expenditure for this Candidate ▶ 13136.70 <b>Transaction ID: D194230</b>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

Full Name (Last, First, Middle Initial) of Each Payee Peter Hart Research Associates		Purpose of Expenditure Poll for Jennifer Dougherty	<input type="text"/>
Mailing Address 1724 Connecticut Ave NW		Date MM / DD / YYYY 10 / 14 / 2008	Category/Type
City Washington	State ZIP Code DC 20009		
Name of Federal Candidate Supported Jennifer Dougherty	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	Amount 6500.00	
Aggregate General Election Expenditure for this Candidate ▶ 6500.00 <b>Transaction ID: D194275</b>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

<b>SUBTOTAL</b> of Expenditures This Page (optional) .....	<b>7744.44</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>7744.44</b>

**SCHEDULE H2 (FEC Form 3X)  
ALLOCATION RATIOS**

NAME OF COMMITTEE (In Full)  
**Democratic State Central Committee of Maryland**

**RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT  
ACTIVITIES APPEARING ON THIS REPORT.**

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.  
**For PACs Only** : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

<p>ACTIVITY OR EVENT IDENTIFIER <b>2008 awards gala</b></p> <hr/> <p>ACTIVITY IS:  <input checked="" type="checkbox"/> Fundraising      <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS:  <input checked="" type="checkbox"/> New      <input type="checkbox"/> Revised      <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL %</p> <p style="text-align: center; border: 1px solid black; padding: 2px;"><b>55.00%</b></p>	<p>NONFEDERAL %</p> <p style="text-align: center; border: 1px solid black; padding: 2px;"><b>45.00%</b></p> <p><b>Transaction ID: R165</b></p>
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**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Aaron Avarkotos			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 9 West 6th Street			Allocated Activity or Event Year-To-Date 322608.42		
City Oswego	State NY	Zip Code 13126	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/>		
Purpose of Disbursement: mileage			Transaction ID: D194221		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
83.19		213.92		297.11

<b>B. Full Name (Last, First, Middle Initial)</b> Arundel Direct Mailing			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 921 East Fort Avenue			Allocated Activity or Event Year-To-Date 17708.68		
City Baltimore	State MD	Zip Code 21230	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/>		
Purpose of Disbursement: Gala Fundraiser mailing no FEA			Transaction ID: D194276		
Activity or Event Identifier: 2008 awards gala					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2677.75		2190.89		4868.64

<b>C. Full Name (Last, First, Middle Initial)</b> BWI			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Main Terminal			Allocated Activity or Event Year-To-Date 322608.42		
City Linthicum	State MD	Zip Code 21090	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/>		
Purpose of Disbursement: parking see Quincey Gamble			Transaction ID: D194280		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.60		14.40		20.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2760.94		2404.81		5165.75

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Capitol Grill			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 500 E Pratt Street			Allocated Activity or Event Year-To-Date 322608.42		
City	State	Zip Code	Category/Type		
Baltimore	MD	21202			
Purpose of Disbursement: Dinner meeting					
Activity or Event Identifier: Administrative			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/> <b>Transaction ID:</b> D187877		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.91		110.35		153.26

<b>B. Full Name (Last, First, Middle Initial)</b> Castlebay's Restaurant			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 193 Main Street			Allocated Activity or Event Year-To-Date 322608.42		
City	State	Zip Code	Category/Type		
Annapolis	MD	21401			
Purpose of Disbursement: Staff and officer meeting					
Activity or Event Identifier: Administrative			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/> <b>Transaction ID:</b> D187880		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
107.45		276.30		383.75

<b>C. Full Name (Last, First, Middle Initial)</b> CVS Pharmacy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 123 Main Street			Allocated Activity or Event Year-To-Date 322608.42		
City	State	Zip Code	Category/Type		
Annapolis	MD	21401			
Purpose of Disbursement: cell phone air card					
Activity or Event Identifier: Administrative			Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/> <b>Transaction ID:</b> D187882		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.42		39.66		55.08

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
165.78		426.31		592.09

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Donna's Coffee Village			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3101 St Paul Street			Allocated Activity or Event Year-To-Date 322608.42		
City Baltimore	State MD	Zip Code 21218	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/>		
Purpose of Disbursement: Breakfast meeting			Transaction ID: D194286		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.90		15.16		21.06

<b>B. Full Name (Last, First, Middle Initial)</b> Hilton Baltimore			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 401 W Pratt Street			Allocated Activity or Event Year-To-Date 17708.68		
City Baltimore	State MD	Zip Code 21201	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/>		
Purpose of Disbursement: deposit on fundraiser venue no FEA			Transaction ID: D194277		
Activity or Event Identifier: 2008 awards gala					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5500.00		4500.00		10000.00

<b>C. Full Name (Last, First, Middle Initial)</b> Hilton Baltimore			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 401 W Pratt Street			Allocated Activity or Event Year-To-Date 322608.42		
City Baltimore	State MD	Zip Code 21201	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/>		
Purpose of Disbursement: Lunch meeting			Transaction ID: D187886		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.10		46.56		64.66

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5524.00		4561.72		10085.72

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Hotel Allerton Hotel			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 701 North Michigan Ave			Allocated Activity or Event Year-To-Date [ 322608.42 ]	
City	State	Zip Code	Category/ Type [            ]	
Chicago	IL	60611		
Purpose of Disbursement: hotel accomodations see Quincey Gamble			Date M M / D D / Y Y Y Y [ 1 0 / 0 1 / 2 0 0 8 ]	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Transaction ID: D194279	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[ 59.80 ]		[ 153.77 ]		[ 213.57 ]

<b>B. Full Name (Last, First, Middle Initial)</b> Paychex Inc			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 700 Red Brooke Blvd Suite 200			Allocated Activity or Event Year-To-Date [ 322608.42 ]	
City	State	Zip Code	Category/ Type [            ]	
Owings Mills	MD	21117		
Purpose of Disbursement: payroll service			Date M M / D D / Y Y Y Y [ 1 0 / 0 6 / 2 0 0 8 ]	
Activity or Event Identifier: Administrative			Transaction ID: D187879	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[ 459.49 ]		[ 1181.53 ]		[ 1641.02 ]

<b>C. Full Name (Last, First, Middle Initial)</b> Paychex Inc			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 700 Red Brooke Blvd Suite 200			Allocated Activity or Event Year-To-Date [ 322608.42 ]	
City	State	Zip Code	Category/ Type [            ]	
Owings Mills	MD	21117		
Purpose of Disbursement: payroll service			Date M M / D D / Y Y Y Y [ 1 0 / 0 9 / 2 0 0 8 ]	
Activity or Event Identifier: Administrative			Transaction ID: D187889	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[ 37.18 ]		[ 95.59 ]		[ 132.77 ]

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[ 496.67 ]		[ 1277.12 ]		[ 1773.79 ]

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[            ]	[            ]	[            ]

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Quincey Gamble			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 117 S Chapel Street			Allocated Activity or Event Year-To-Date 322608.42		
City Baltimore	State MD	Zip Code 21231	Date <input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Travel expense see memo entries			Transaction ID: D187871		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
65.40		168.17		233.57

<b>B. Full Name (Last, First, Middle Initial)</b> Quincey Gamble			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 117 S Chapel Street			Allocated Activity or Event Year-To-Date 322608.42		
City Baltimore	State MD	Zip Code 21231	Date <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: mileage			Transaction ID: D187873		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
140.25		360.65		500.90

<b>C. Full Name (Last, First, Middle Initial)</b> Stones Phones			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 411-750 Rancho LasPalma Dr # E-3			Allocated Activity or Event Year-To-Date 17708.68		
City Rancho Mirage	State CA	Zip Code 92270	Date <input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Robo calls for Fundraiser no FEA			Transaction ID: D194278		
Activity or Event Identifier: 2008 awards gala					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1562.02		1278.02		2840.04

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1767.67		1806.84		3574.51

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Democratic State Central Committee of Maryland

<b>A. Full Name (Last, First, Middle Initial)</b> Subway Sandwiches			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7101 Democracy Blvd			Allocated Activity or Event Year-To-Date 322608.42		
City Bethesda	State MD	Zip Code 20817	Date <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: lunch meeting			Transaction ID: D194287		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.92		15.23		21.15

<b>B. Full Name (Last, First, Middle Initial)</b> Target			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 10401 Martin king Jr Highway			Allocated Activity or Event Year-To-Date 322608.42		
City Bowie	State MD	Zip Code 20720	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Cell phones			Transaction ID: D187893		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.62		83.87		116.49

<b>C. Full Name (Last, First, Middle Initial)</b> Verizon			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 17577			Allocated Activity or Event Year-To-Date 322608.42		
City Baltimore	State MD	Zip Code 21297	Date <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: office phones			Transaction ID: D194210		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1498.50		3853.30		5351.80

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1537.04		3952.40		5489.44

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
12252.10		14429.20		26681.30

**Image# 28992943477**

Form/Schedule: **SA12**

Transaction ID: **C1327565**

None of the funds from this DCCC transfer in were use on any expenditures for exempt activity.

Form/Schedule: **SA12**

Transaction ID: **C1327566**

None of the funds from this DCCC transfer in were use on any expenditures for exempt activity.

\*\*\*\*\*

**Image# 28992943478**

Form/Schedule: **SB30B**  
Transaction ID: **D194235**

This expenditure is for exempt slate card Frank Kratovil, Dutch Ruppertsburger and Jennifer Dougherty, Harford Co handout.

Form/Schedule: **SH4**  
Transaction ID: **D194276**

Fundraiser was not held on behalf of any Federal Candidate

\*\*\*\*\*

**Image# 28992943479**

Form/Schedule: **SH4**  
Transaction ID: **D194277**

This expenditure for fundraiser is not on behalf of any federal candidate.

Form/Schedule: **SH4**  
Transaction ID: **D194278**

This expenditure for Robo calls were for our Gala fundraiser and not on behalf of any Federal Candidate

\*\*\*\*\*