

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Leadership of Today and Tomorrow

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		195346.49
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	233890.72									
(c) Total Receipts (from Line 19)	38500.00	110900.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	272390.72	306246.49								
7. Total Disbursements (from Line 31)	66576.33	100432.10								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	205814.39	205814.39								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	2401.51									

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Leadership of Today and Tomorrow

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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		
(i) Itemized (use Schedule A)	8000.00	26900.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	8000.00	26900.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	30500.00	84000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	38500.00	110900.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	38500.00	110900.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	38500.00	110900.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	3576.33	12432.10
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	3576.33	12432.10
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	63000.00	88000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	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	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	66576.33	100432.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	66576.33	100432.10

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	38500.00	110900.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	38500.00	110900.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3576.33	12432.10
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3576.33	12432.10

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Leadership of Today and Tomorrow

A. Full Name (Last, First, Middle Initial)
Richard C. White

Mailing Address 5035 Macomb Street, NW

City Washington State DC Zip Code 20016-2674

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

Name of Employer Alpine Group, Inc. Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 06 / 29 / 2010
Transaction ID: C176
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Yocha Dehe Wintun Nation

Mailing Address 18960 County Road 75A
P.O. Box 18

City Brooks State CA Zip Code 95606

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: 06 / 07 / 2010
Transaction ID: C172
Amount of Each Receipt this Period: 5000.00

C. Full Name (Last, First, Middle Initial)
Eastern Band Of Cherokee Indians

Mailing Address P.O. Box 455

City Cherokee State NC Zip Code 28719

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 06 / 07 / 2010
Transaction ID: C173
Amount of Each Receipt this Period: 2500.00

SUBTOTAL of Receipts This Page (optional) ► 8000.00

TOTAL This Period (last page this line number only) ► 8000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 26
	(check only one)
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Leadership of Today and Tomorrow

A.	Full Name (Last, First, Middle Initial) American Society of Anesthesiologists Political Action Committee	Date of Receipt MM / DD / YYYY 06 / 02 / 2010
	Mailing Address 520 North Northwest Highway	Transaction ID: C167
	City State Zip Code Park Ridge IL 60068	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C C00255752	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

B.	Full Name (Last, First, Middle Initial) Comcast Corporation Political Action Committee	Date of Receipt MM / DD / YYYY 06 / 02 / 2010
	Mailing Address 1701 JFK Boulevard 49th Floor	Transaction ID: C168
	City State Zip Code Philadelphia PA 19103	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C C00248716	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

C.	Full Name (Last, First, Middle Initial) Aircraft Owners & Pilots Association PAC	Date of Receipt MM / DD / YYYY 06 / 29 / 2010
	Mailing Address 421 Aviation Way	Transaction ID: C182
	City State Zip Code Frederick MD 21701	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C C00131185	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

SUBTOTAL of Receipts This Page (optional)	11000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Leadership of Today and Tomorrow

A. Full Name (Last, First, Middle Initial)
American Health Care Association PAC
Mailing Address 1201 L Street, NW
City Washington State DC Zip Code 20005
FEC ID number of contributing federal political committee. **C** C00006080
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 06 / 30 / 2010
Transaction ID: C178
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Metlife Inc. Employees' Political Participation Fund A
Mailing Address 1095 Avenue of the Americas Area 4D
City New York State NY Zip Code 10036
FEC ID number of contributing federal political committee. **C** C00040923
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00
Date of Receipt 06 / 28 / 2010
Transaction ID: C177
Amount of Each Receipt this Period 2500.00

C. Full Name (Last, First, Middle Initial)
National Association of Realtors Political Action Committee
Mailing Address 430 North Michigan Avenue
City Chicago State IL Zip Code 60611
FEC ID number of contributing federal political committee. **C** C00030718
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt 06 / 04 / 2010
Transaction ID: C166
Amount of Each Receipt this Period 5000.00

SUBTOTAL of Receipts This Page (optional) ► 8000.00
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 9 / 26
	<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)
Leadership of Today and Tomorrow

A.	Full Name (Last, First, Middle Initial) American Podiatric Medical Association Political Action Committee	Date of Receipt MM / DD / YYYY 06 / 07 / 2010
	Mailing Address 9312 Old Georgetown Road	Transaction ID: C171
	City State Zip Code Bethesda MD 20814	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C C00008839	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00

B.	Full Name (Last, First, Middle Initial) International Association of Firefighters FIREPAC	Date of Receipt MM / DD / YYYY 06 / 07 / 2010
	Mailing Address 1750 New York Ave NW	Transaction ID: C174
	City State Zip Code Washington DC 20006	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C C00029447	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

C.	Full Name (Last, First, Middle Initial) National Association of Insurance & Financial Advisors PAC	Date of Receipt MM / DD / YYYY 06 / 07 / 2010
	Mailing Address 2901 Telestar Court	Transaction ID: C175
	City State Zip Code Falls Church VA 22042	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C C00005249	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00

SUBTOTAL of Receipts This Page (optional)	7500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 26
(check only one)

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

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NAME OF COMMITTEE (In Full)
Leadership of Today and Tomorrow

A. Full Name (Last, First, Middle Initial)
American Association of Nurse Anesthetists CRNA PAC

Mailing Address 222 South Prospect Ave

City State Zip Code
Park Ridge IL 60068

FEC ID number of contributing federal political committee. **C** C00173153

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2010

Transaction ID: C180

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Sodexo Inc. PAC

Mailing Address 9801 Washingtonian Boulevard
12th Floor

City State Zip Code
Gaithersburg MD 20878

FEC ID number of contributing federal political committee. **C** C00361014

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2010

Transaction ID: C181

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Dairy Farmers Of America, Inc. DEPAC

Mailing Address P.O. Box 909700

City State Zip Code
Kansas City MO 64190

FEC ID number of contributing federal political committee. **C** C00001388

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2010

Transaction ID: C179

Amount of Each Receipt this Period
2000.00

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

TOTAL This Period (last page this line number only) ► **30500.00**

**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)

<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)
Leadership of Today and Tomorrow

A.	Full Name (Last, First, Middle Initial) National Democratic Club	Transaction ID: D120 Date of Disbursement
	Mailing Address 30 Ivy Street, SE	<input type="text" value="06"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement Catering	<input type="text" value="584.33"/>
	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) Arum Group, LLC	Transaction ID: D119 Date of Disbursement
	Mailing Address 625 Third Street, NE Suite 2	<input type="text" value="06"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Consulting Services	<input type="text" value="1000.00"/>
	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) Arum Group, LLC	Transaction ID: D122 Date of Disbursement
	Mailing Address 625 Third Street, NE Suite 2	<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Consulting Services	<input type="text" value="1000.00"/>
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2584.33"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 26

<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)
Leadership of Today and Tomorrow

A.

Full Name (Last, First, Middle Initial)
Avenue Events, LLC

Mailing Address 710B Mt. Vernon Avenue

City Alexandria State VA Zip Code 22301

Purpose of Disbursement
Catering

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D121

Date of Disbursement

06 / 25 / 2010

Amount of Each Disbursement this Period

992.00

SUBTOTAL of Disbursements This Page (optional)

992.00

TOTAL This Period (last page this line number only)

3576.33

**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 checked="" 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)
Leadership of Today and Tomorrow

<p>A. Full Name (Last, First, Middle Initial) Kathy Dahlkemper For Congress</p> <p>Mailing Address 530 Seminole Drive</p> <p>City Erie State PA Zip Code 16505</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name Kathleen Ann Dahlkemper</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 03</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D129 Date of Disbursement 06 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Halvorson For Congress</p> <p>Mailing Address P.O. Box 176</p> <p>City Crete State IL Zip Code 60417</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name Deborah Halvorson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 11</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134 Date of Disbursement 06 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Tim Bishop For Congress</p> <p>Mailing Address P.O. Box 437</p> <p>City Farmingville State NY Zip Code 11738</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name Tim Bishop</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D124 Date of Disbursement 06 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Leadership of Today and Tomorrow

<p>A. Full Name (Last, First, Middle Initial) Ellsworth For Indiana</p> <p>Mailing Address P.O. Box 62</p> <p>City Evansville State IN Zip Code 47701</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Brad Ellsworth</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D156 Date of Disbursement 06 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Bill Foster For Congress</p> <p>Mailing Address P.O. Box 703</p> <p>City Geneva State IL Zip Code 60134</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name William G. Foster</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 14</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D132 Date of Disbursement 06 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Dina Titus For Congress</p> <p>Mailing Address 3711 East Sunset Road Suite C5</p> <p>City Las Vegas State NV Zip Code 89120</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Dina Titus</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D151 Date of Disbursement 06 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Leadership of Today and Tomorrow

A.	Full Name (Last, First, Middle Initial) Spratt For Congress Committee	Transaction ID: D148 Date of Disbursement
	Mailing Address P.O. Box 830	<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City York State SC Zip Code 29745	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2000.00"/>
	Candidate Name John Spratt	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 05	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bill Owens For Congress	Transaction ID: D143 Date of Disbursement
	Mailing Address P.O. Box 1575	<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City Plattsburgh State NY Zip Code 12901	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2000.00"/>
	Candidate Name William Owens	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Driehaus For Congress	Transaction ID: D131 Date of Disbursement
	Mailing Address 1018 Benz Avenue	<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City Cincinnati State OH Zip Code 45238	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Steven L. Driehaus	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Leadership of Today and Tomorrow

A.	Full Name (Last, First, Middle Initial) Connolly For Congress	Transaction ID: D128 Date of Disbursement
	Mailing Address P.O. Box 563	<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City Merrifield State VA Zip Code 22116	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Gerry Connolly	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 11	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Frank Kratovil For Congress	Transaction ID: D140 Date of Disbursement
	Mailing Address 222 Main Sail Drive P.O. Box 518	<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City Stevensville State MD Zip Code 21666	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Frank Kratovil	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Childers For Congress	Transaction ID: D127 Date of Disbursement
	Mailing Address P.O. Box 177	<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City Booneville State MS Zip Code 38829	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2000.00"/>
	Candidate Name Travis Childers	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 01	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Leadership of Today and Tomorrow

A.	Full Name (Last, First, Middle Initial) Friends Of Phil Hare	Transaction ID: D135 Date of Disbursement 06 / 29 / 2010
	Mailing Address 224 18th Street P.O. Box 4183	Amount of Each Disbursement this Period 1000.00
	City Rock Island State IL Zip Code 61204	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name Philip Hare	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 17	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) John Hall For Congress	Transaction ID: D133 Date of Disbursement 06 / 29 / 2010
	Mailing Address P.O. Box 469	Amount of Each Disbursement this Period 2000.00
	City Beacon State NY Zip Code 12508	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name John Hall	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Joe Donnelly For Congress	Transaction ID: D130 Date of Disbursement 06 / 29 / 2010
	Mailing Address P.O. Box 1961	Amount of Each Disbursement this Period 1000.00
	City South Bend State IN Zip Code 46634	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name Joe Donnelly	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	4000.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Leadership of Today and Tomorrow

A.	Full Name (Last, First, Middle Initial) Kirkpatrick For Arizona	Transaction ID: D138 Date of Disbursement 06 / 29 / 2010
	Mailing Address P.O. Box 993	Amount of Each Disbursement this Period 1000.00
	City Prescott State AZ Zip Code 86302	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name Ann Kirkpatrick	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Kosmas For Congress	Transaction ID: D139 Date of Disbursement 06 / 29 / 2010
	Mailing Address P.O. Box 1547	Amount of Each Disbursement this Period 2000.00
	City New Smyrna Beach State FL Zip Code 32170	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name Suzanne Kosmas	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Boyd For Congress	Transaction ID: D157 Date of Disbursement 06 / 30 / 2010
	Mailing Address P.O. Box 15703	Amount of Each Disbursement this Period 2000.00
	City Tallahassee State FL Zip Code 32317	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name Allen Boyd, Jr.	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Leadership of Today and Tomorrow

A.

Full Name (Last, First, Middle Initial)
Tim Walz For US Congress

Transaction ID: D152
Date of Disbursement

Mailing Address P.O. Box 938

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	0

City Mankato State MN Zip Code 56002

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Contribution

--

Candidate Name
Tim Walz

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: MN District: 01

B.

Full Name (Last, First, Middle Initial)
Martin Heinrich For Congress

Transaction ID: D136
Date of Disbursement

Mailing Address 2118 Central Avenue, SE
Unit 71

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	0

City Albuquerque State NM Zip Code 87106

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution

--

Candidate Name
Martin Heinrich

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NM District: 01

C.

Full Name (Last, First, Middle Initial)
Schauer For Congress

Transaction ID: D146
Date of Disbursement

Mailing Address PO Box 100

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	0

City Battle Creek State MI Zip Code 49016

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Contribution

--

Candidate Name
Mark H. Schauer

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: MI District: 07

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

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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 checked="" 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)
Leadership of Today and Tomorrow

<p>A. Full Name (Last, First, Middle Initial) Arcuri For Congress</p> <p>Mailing Address P.O. Box 8508</p> <p>City Utica State NY Zip Code 13505</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Michael Arcuri</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D123 Date of Disbursement 06 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Committee To Elect Alan Grayson</p> <p>Mailing Address P.O. Box 536447</p> <p>City Orlando State FL Zip Code 32853</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Alan Grayson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 08</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D116 Date of Disbursement 06 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Bocchieri For Congress</p> <p>Mailing Address 337 Third Street, NW</p> <p>City Canton State OH Zip Code 44702</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name John Bocchieri</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 16</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D125 Date of Disbursement 06 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Leadership of Today and Tomorrow

A.	Full Name (Last, First, Middle Initial) Sestak For Senate	Transaction ID: D155 Date of Disbursement
	Mailing Address P.O. Box 1936	<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City Media State PA Zip Code 19063	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2000.00"/>
	Candidate Name Joe Sestak	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: PA District:	

B.	Full Name (Last, First, Middle Initial) John Salazar For Congress	Transaction ID: D153 Date of Disbursement
	Mailing Address P.O. Box 534	<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City Pueblo State CO Zip Code 81002	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2000.00"/>
	Candidate Name John Salazar	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: CO District: 03	

C.	Full Name (Last, First, Middle Initial) Ciro D. Rodriguez for Congress	Transaction ID: D145 Date of Disbursement
	Mailing Address P.O. Box 14528	<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City San Antonio State TX Zip Code 78214	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name Ciro D. Rodriguez	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: TX District: 23	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="9000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 22 / 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Leadership of Today and Tomorrow

<p>A. Full Name (Last, First, Middle Initial) Harry Teague For Congress</p> <p>Mailing Address P.O. Box 5153</p> <p>City Hobbs State NM Zip Code 88241</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Harry Teague</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 02</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D150 Date of Disbursement 06 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Earl Pomeroy For Congress</p> <p>Mailing Address P.O. Box 9336</p> <p>City Fargo State ND Zip Code 58106</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Earl Pomeroy</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 01</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D144 Date of Disbursement 06 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Friends Of Glenn Nye</p> <p>Mailing Address PO Box 68444</p> <p>City Virginia Beach State VA Zip Code 23471</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Glenn C. Nye, III</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 02</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D142 Date of Disbursement 06 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Leadership of Today and Tomorrow

<p>A. Full Name (Last, First, Middle Initial) Carol Shea-Porter for Congress</p> <p>Mailing Address P.O. Box 453</p> <p>City Rochester State NH Zip Code 03866</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Carol Shea-Porter</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D147</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) Mike McMahon for Congress</p> <p>Mailing Address 66 Arnold Street</p> <p>City Staten Island State NY Zip Code 10301</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Michael McMahon</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D117</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Boswell For Congress</p> <p>Mailing Address P.O. Box 6220</p> <p>City Des Moines State IA Zip Code 50309</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Leonard Boswell</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 03</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D126</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Leadership of Today and Tomorrow

<p>A. Full Name (Last, First, Middle Initial) Hoosiers For Hill</p> <p>Mailing Address P.O. Box 1071</p> <p>City Seymour State IN Zip Code 47274</p> <p>Purpose of Disbursement Contribution <input type="text"/></p> <p>Candidate Name Baron Hill Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IN District: 09</p>	<p>Transaction ID: D158 Date of Disbursement 06 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Betty Sutton For Congress</p> <p>Mailing Address 1700 West Market Street Suite 155</p> <p>City Akron State OH Zip Code 44313</p> <p>Purpose of Disbursement Contribution <input type="text"/></p> <p>Candidate Name Betty Sutton Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 13</p>	<p>Transaction ID: D149 Date of Disbursement 06 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Stephanie Herseth Sandlin for South Dakota</p> <p>Mailing Address P.O. Box 2009</p> <p>City Sioux Falls State SD Zip Code 57101</p> <p>Purpose of Disbursement Contribution <input type="text"/></p> <p>Candidate Name Stephanie Herseth Sandlin Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: SD District: 01</p>	<p>Transaction ID: D137 Date of Disbursement 06 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 25 / 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Leadership of Today and Tomorrow

A.	Full Name (Last, First, Middle Initial) John Carney For Congress	Transaction ID: D154 Date of Disbursement
	Mailing Address P.O. Box 2162	<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City Wilmington State DE Zip Code 19899	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2000.00"/>
	Candidate Name John Carney	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DE District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Harry Mitchell For Congress	Transaction ID: D141 Date of Disbursement
	Mailing Address P.O. Box 23748	<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City Tempe State AZ Zip Code 85285	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2000.00"/>
	Candidate Name Harry Mitchell	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 26 / 26	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Leadership of Today and Tomorrow

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie	Nature of Debt (Purpose): Legal & Accounting Services
Mailing Address 607 14th Street, NW Suite 800	
City State ZIP Code Washington DC 20005	

Outstanding Balance Beginning This Period	Transaction ID: D112	
2017.35		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
384.16	0.00	2401.51

1) SUBTOTALS This Period This Page (optional).....	2401.51
2) TOTALS This Period (last page this line number only).....	2401.51
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	2401.51