

# 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

Reform Without Delay

ADDRESS (number and street) 1831 Bay St. SE  
 Check if different than previously reported. (ACC)  
 Washington DC 20003

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00420786

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:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day **PRE-Election** Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) |                                       |

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

- (d) 30-Day **Post -Election** Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 04 01 2006 through 06 30 2006

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 Diane Evans

Signature of Treasurer Electronically Filed by Diane Evans Date 07 14 2006

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 |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Reform Without Delay

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 4 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

 To: 

|   |   |
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| M | M |
| 0 | 6 |

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| D | D |
| 3 | 0 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

|   | COLUMN A<br>This Period   | COLUMN B<br>Calendar Year-to-Date |   |          |   |   |   |   |  |  |   |      |
|---|---|-----------------------------------|---|----------|---|---|---|---|--|--|---|------|
| 6. (a) Cash on Hand<br>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>6</td></tr></table> | Y   | Y                                 | Y   | Y        | 2 | 0 | 0 | 6 | <table border="1" style="width: 100%; height: 20px;"><tr><td> </td></tr></table> |  | <table border="1" style="width: 100%; height: 20px;"><tr><td align="right">0.00</td></tr></table> | 0.00 |
| Y   | Y   | Y                                 | Y   |          |   |   |   |   |  |  |   |      |
| 2   | 0   | 0                                 | 6   |          |   |   |   |   |  |  |   |      |
|   |   |                                   |   |          |   |   |   |   |  |  |   |      |
| 0.00  |   |                                   |   |          |   |   |   |   |  |  |   |      |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....  | <table border="1" style="width: 100%; height: 20px;"><tr><td align="right">2301.00</td></tr></table>  | 2301.00                           |   |          |   |   |   |   |  |  |   |      |
| 2301.00   |   |                                   |   |          |   |   |   |   |  |  |   |      |
| (c) Total Receipts (from Line 19) .....   | <table border="1" style="width: 100%; height: 20px;"><tr><td align="right">52354.00</td></tr></table> | 52354.00                          | <table border="1" style="width: 100%; height: 20px;"><tr><td align="right">62492.75</td></tr></table> | 62492.75 |   |   |   |   |  |  |   |      |
| 52354.00  |   |                                   |   |          |   |   |   |   |  |  |   |      |
| 62492.75  |   |                                   |   |          |   |   |   |   |  |  |   |      |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....  | <table border="1" style="width: 100%; height: 20px;"><tr><td align="right">54655.00</td></tr></table> | 54655.00                          | <table border="1" style="width: 100%; height: 20px;"><tr><td align="right">62492.75</td></tr></table> | 62492.75 |   |   |   |   |  |  |   |      |
| 54655.00  |   |                                   |   |          |   |   |   |   |  |  |   |      |
| 62492.75  |   |                                   |   |          |   |   |   |   |  |  |   |      |
| 7. Total Disbursements (from Line 31) .....   | <table border="1" style="width: 100%; height: 20px;"><tr><td align="right">46884.49</td></tr></table> | 46884.49                          | <table border="1" style="width: 100%; height: 20px;"><tr><td align="right">54722.24</td></tr></table> | 54722.24 |   |   |   |   |  |  |   |      |
| 46884.49  |   |                                   |   |          |   |   |   |   |  |  |   |      |
| 54722.24  |   |                                   |   |          |   |   |   |   |  |  |   |      |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....   | <table border="1" style="width: 100%; height: 20px;"><tr><td align="right">7770.51</td></tr></table>  | 7770.51                           | <table border="1" style="width: 100%; height: 20px;"><tr><td align="right">7770.51</td></tr></table>  | 7770.51  |   |   |   |   |  |  |   |      |
| 7770.51   |   |                                   |   |          |   |   |   |   |  |  |   |      |
| 7770.51   |   |                                   |   |          |   |   |   |   |  |  |   |      |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....   | <table border="1" style="width: 100%; height: 20px;"><tr><td align="right">0.00</td></tr></table>     | 0.00                              |   |          |   |   |   |   |  |  |   |      |
| 0.00  |   |                                   |   |          |   |   |   |   |  |  |   |      |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <table border="1" style="width: 100%; height: 20px;"><tr><td align="right">0.00</td></tr></table>     | 0.00                              |   |          |   |   |   |   |  |  |   |      |
| 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  
Reform Without Delay

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 4 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

 To: 

|   |   |
|---|---|
| M | M |
| 0 | 6 |

|   |   |
|---|---|
| D | D |
| 3 | 0 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  | 45600.00                      | 48600.00                          |
| (i) Itemized (use Schedule A) .....  | 5754.00                       | 7039.00                           |
| (ii) Unitemized .....  | 51354.00                      | 55639.00                          |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) .....   | 0.00                          | 179.53                            |
| (b) Political Party Committees .....   | 1000.00                       | 2040.29                           |
| (c) Other Political Committees (such as PACs) .....  | 52354.00                      | 57858.82                          |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....     |                               |                                   |
| 12. Transfers From Affiliated/Other Party Committees .....   | 0.00                          | 2500.00                           |
| 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                          | 2133.93                           |
| 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)) .....                          | 52354.00                      | 62492.75                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 52354.00                      | 62492.75                          |

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

| <b>II. DISBURSEMENTS</b>  | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|---|---------------------------------------|---|
| 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.....   | 8896.66                               | 14234.41                                  |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....                           | 8896.66                               | 14234.41                                  |
| 22. Transfers to Affiliated/Other Party Committees.....   | 37987.83                              | 40487.83                                  |
| 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).....  | 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))..        | 46884.49                              | 54722.24                                  |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... | 46884.49                              | 54722.24                                  |

**DETAILED SUMMARY PAGE**  
of Disbursements

| III. Net Contributions/Operating Expenditures                                       | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>from Line 11(d), page 3) .....        | 52354.00                      | 57858.82                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                           | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....   | 52354.00                      | 57858.82                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b))..... | 8896.66                       | 14234.41                          |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....               | 0.00                          | 2133.93                           |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....             | 8896.66                       | 12100.48                          |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 6 / 27                  |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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)  
Reform Without Delay

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Alison Fox   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 6 / 0 9 / 2 0 0 6 |
| Mailing Address 4905 Scarsdale Rd.  |  | <b>Transaction ID:</b> C29508                                 |
| City State Zip Code<br>Bethesda MD 20816  | Amount of Each Receipt this Period<br>500.00 |   |
| FEC ID number of contributing federal political committee.<br>C   |  |   |
| Name of Employer Self Employed<br>Self Employed   | Occupation<br>Information Requested          |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00           |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Sharon R Wilkes  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 6 / 2 5 / 2 0 0 6 |
| Mailing Address 7504 Vale St.   |  | <b>Transaction ID:</b> C29612                                 |
| City State Zip Code<br>Chevy Chase MD 20815   | Amount of Each Receipt this Period<br>250.00 |   |
| FEC ID number of contributing federal political committee.<br>C   |  |   |
| Name of Employer Self Employed<br>Self Employed   | Occupation<br>Attorney                       |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00           |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> James R Worsley, Jr.   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 6 / 0 9 / 2 0 0 6 |
| Mailing Address 11 Quincy St.   |   | <b>Transaction ID:</b> C29529                                 |
| City State Zip Code<br>Chevy Chase MD 20815   | Amount of Each Receipt this Period<br>1000.00 |   |
| FEC ID number of contributing federal political committee.<br>C   |   |   |
| Name of Employer<br>Oberkaler Grimes & Shriror  | Occupation<br>Attorney                        |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |   |

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

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 7 / 27                  |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Reform Without Delay

**A.** Full Name (Last, First, Middle Initial)  
Walter I Cohn

Mailing Address 6212 Goodview St.

City State Zip Code  
Bethesda MD 20817

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

Name of Employer Occupation  
Self Employed Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 09 / 2006

**Transaction ID: C29504**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Asok K Motayed

Mailing Address 9934 Potomac Manor Dr

City State Zip Code  
Potomac MD 20854

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

Name of Employer Occupation  
NexGen Systems Corp. Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
06 / 09 / 2006

**Transaction ID: C29517**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Carl W Pinskey

Mailing Address 739 Sonata Way

City State Zip Code  
Silver Spring MD 20901

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

Name of Employer Occupation  
CHM Inc. Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
06 / 09 / 2006

**Transaction ID: C29520**

Amount of Each Receipt this Period  
2000.00

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>7500.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 8 / 27                  |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Reform Without Delay

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

Mailing Address 7106 Ridgewood Ave.

City State Zip Code  
Chevy Chase MD 20815

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

Name of Employer College Park Car Wash, Inc.  
Occupation Principal

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 25 / 2006

Transaction ID: C29546

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Cary H Sherman

Mailing Address 9125 Vendome Dr.

City State Zip Code  
Bethesda MD 20817

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

Name of Employer RIAA  
Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 25 / 2006

Transaction ID: C29598

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Faye F Cohen

Mailing Address 5518 Trent St.

City State Zip Code  
Chevy Chase MD 20815

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

Name of Employer N/A  
Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 25 / 2006

Transaction ID: C29540

Amount of Each Receipt this Period  
1000.00

|  |   |         |
|--|---|---------|
| <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) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 9 / 27                  |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Reform Without Delay

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

Mailing Address 6212 Goodview St.

City State Zip Code  
Bethesda MD 20817

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

Name of Employer Occupation  
Paley Rothman Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
06 / 25 / 2006

Transaction ID: C29541

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
Jane T Nishida

Mailing Address 8010 Post Oak Rd.

City State Zip Code  
Potomac MD 10854

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

Name of Employer Occupation  
World Bank Senior Policy Advisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 09 / 2006

Transaction ID: C29518

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Anthony W Gambino

Mailing Address 5130 Wissioming Rd.

City State Zip Code  
Bethesda MD 20816

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

Name of Employer Occupation  
Self Employed International Affairs Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 25 / 2006

Transaction ID: C29555

Amount of Each Receipt this Period  
1000.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 4000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 10 / 27                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Reform Without Delay

**A.** Full Name (Last, First, Middle Initial)  
Owen W Roberts

Mailing Address 4701 Fulton St. NW

City Washington State DC Zip Code 20007

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 0 9 / 2 0 0 6

**Transaction ID: C29523**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
W. Neil Eggleston

Mailing Address 4213 Rosemary St.

City Chevy Chase State MD Zip Code 20815

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

Name of Employer Howrey Simon Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 2 5 / 2 0 0 6

**Transaction ID: C29547**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mark M Levin

Mailing Address 4700 Linnean Ave. NW

City Washington State DC Zip Code 20008

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 2 5 / 2 0 0 6

**Transaction ID: C29571**

Amount of Each Receipt this Period  
250.00

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>750.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |               |

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

|  |                              |                              |
|--|------------------------------|------------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 11 / 27                 |
|  | (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)  
Reform Without Delay

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> William S Jordan |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 6 / 2 5 / 2 0 0 6                 |
| Mailing Address 9707 Old Georgetown Rd.<br>Apt. 2620                  |   | <b>Transaction ID:</b> C29564<br>Amount of Each Receipt this Period<br>500.00 |
| City State Zip Code<br>Bethesda MD 20814                              | FEC ID number of contributing federal political committee.<br>C   |   |
| Name of Employer N/A<br>Occupation Retired                            | Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Walter L Faust, Ph.D. |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 6 / 0 9 / 2 0 0 6                  |
| Mailing Address 10821 Glen Rd.   |   | <b>Transaction ID:</b> C29507<br>Amount of Each Receipt this Period<br>1000.00 |
| City State Zip Code<br>Potomac MD 20854                                    | FEC ID number of contributing federal political committee.<br>C   |  |
| Name of Employer N/A<br>Occupation Retired                                 | Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00  |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Ralph C Stephens |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 6 / 2 5 / 2 0 0 6                 |
| Mailing Address 11 Magnolia Parkway                                   |   | <b>Transaction ID:</b> C29604<br>Amount of Each Receipt this Period<br>250.00 |
| City State Zip Code<br>Chevy Chase MD 20815                           | FEC ID number of contributing federal political committee.<br>C   |   |
| Name of Employer N/A<br>Occupation Retired                            | Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00  |

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

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

|  |   |              |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 12 / 27 |
|  | <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)  
Reform Without Delay

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

Mailing Address 4248 50th St. NW

City Washington State DC Zip Code 20016

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

Name of Employer N/A Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
06 / 25 / 2006

Transaction ID: C29619

Amount of Each Receipt this Period  
1500.00

\* In-Kind: Catering

**B.** Full Name (Last, First, Middle Initial)  
David M Orta

Mailing Address 8803 Stonehaven Ct.

City Potomac State MD Zip Code 20854

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

Name of Employer Arnold & Porter Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
06 / 25 / 2006

Transaction ID: C29586

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Milan G Bhagat

Mailing Address 9451 River Rd.

City Potomac State MD Zip Code 20854

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

Name of Employer Tri Star Tech Grp. LLC Occupation Business Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
06 / 25 / 2006

Transaction ID: C29532

Amount of Each Receipt this Period  
1000.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 3000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |                              |                              |                             |
|--|---|------------------------------|------------------------------|-----------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 13 / 27                 |                              |                             |
|  | <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)  
Reform Without Delay

**A.** Full Name (Last, First, Middle Initial)  
Charles E Farnsworth

Mailing Address 2814 Woolsey St.

City State Zip Code  
Berkeley CA 94705

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

Name of Employer Self Employed Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 09 / 2006

**Transaction ID: C29506**

Amount of Each Receipt this Period  
350.00

**B.** Full Name (Last, First, Middle Initial)  
Michael D. McCurry

Mailing Address 10313 Fawcett St.

City State Zip Code  
Kensington MD 20895

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

Name of Employer Public Strategies Washing- ton LLC Occupation Principal

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 09 / 2006

**Transaction ID: C29515**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 6401 Tone Dr.

City State Zip Code  
Bethesda MD 20817

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 25 / 2006

**Transaction ID: C29545**

Amount of Each Receipt this Period  
250.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 1600.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|  |   |                              |                              |                             |
|--|---|------------------------------|------------------------------|-----------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 14 / 27                 |                              |                             |
|  | <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)  
Reform Without Delay

**A.** Full Name (Last, First, Middle Initial)  
Leora C McElroy

Mailing Address 2445 Lyttonsville Rd.  
810

City State Zip Code  
Silver Spring MD 20910

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 09 / 2006

**Transaction ID: C29516**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mary Lou Randour

Mailing Address 4330 Leland St.

City State Zip Code  
Chevy Chase MD 20815

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

Name of Employer Doris Day Animal Foundation Occupation Psychologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 25 / 2006

**Transaction ID: C29591**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Caroline P Huber

Mailing Address One Brown's Dock Rd.

City State Zip Code  
Locust NJ 07760

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 09 / 2006

**Transaction ID: C29511**

Amount of Each Receipt this Period  
2000.00

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>3500.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

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

|  |   |                              |                              |                             |
|--|---|------------------------------|------------------------------|-----------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 15 / 27                 |                              |                             |
|  | <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)  
Reform Without Delay

**A.** Full Name (Last, First, Middle Initial)  
Richard P Schifter

Mailing Address 1133 Connecticut Ave.  
#706

City Washington State DC Zip Code 20036

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

Name of Employer Tarrant Partners, LP Occupation Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 0 9 / 2 0 0 6

Transaction ID: C29526

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
David M Osnos

Mailing Address 6606 Rivercrest Ct.

City Bethesda State MD Zip Code 20816

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

Name of Employer Arent Fox Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 5 / 2 0 0 6

Transaction ID: C29587

Amount of Each Receipt this Period  
500.00

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

Mailing Address 5630 Wisconsin Ave.  
#1205

City Chevy Chase State MD Zip Code 20815

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

Name of Employer Adler Associates Occupation Principal

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 0 9 / 2 0 0 6

Transaction ID: C29501

Amount of Each Receipt this Period  
1000.00

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)  
Reform Without Delay

**A.** Full Name (Last, First, Middle Initial)  
Robert J Reynolds

Mailing Address 11304 Tara Rd.

City Potomac State MD Zip Code 20854

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

Name of Employer Brattle Group Occupation Principal

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 5 |   | 2 | 0 | 0 | 6 |

**Transaction ID: C29593**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
Nicholas S McConnell

Mailing Address 5004 Warren St. NW

City Washington State DC Zip Code 20016

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

Name of Employer Jackson & Campbell, PC Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 5 |   | 2 | 0 | 0 | 6 |

**Transaction ID: C29578**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Jean R Bruder

Mailing Address 8 E. Lenox St.

City Chevy Chase State MD Zip Code 20815

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

Name of Employer N/A Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 5 |   | 2 | 0 | 0 | 6 |

**Transaction ID: C29537**

Amount of Each Receipt this Period  
2000.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 4250.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |



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

|  |  |              |
|--|--|--------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 17 / 27 |
|  | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><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)  
Reform Without Delay

|   |   |  |  |
|---|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Putnam M Ebinger   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 09 / 2006 |  |
| Mailing Address 7306 Meadow Lane  |   | <b>Transaction ID:</b> C29505                            |  |
| City State Zip Code<br>Chevy Chase MD 20815   | Amount of Each Receipt this Period<br>1000.00 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |  |  |
| Name of Employer<br>CBACI   | Occupation<br>Grant Writer                    |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |  |  |

|   |   |  |  |
|---|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Philip Savopoulos  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 25 / 2006 |  |
| Mailing Address 5010 Inwood St.   |   | <b>Transaction ID:</b> C29595                            |  |
| City State Zip Code<br>Hyattsville MD 20781   | Amount of Each Receipt this Period<br>1000.00 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |  |  |
| Name of Employer Information Requested  | Occupation<br>Executive                       |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Michael D. Trager  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 25 / 2006 |  |
| Mailing Address 4010 Mansion Dr. NW   |  | <b>Transaction ID:</b> C29608                            |  |
| City State Zip Code<br>Washington DC 20007  | Amount of Each Receipt this Period<br>500.00 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |  |  |
| Name of Employer<br>Arnold & Porter LLP   | Occupation<br>Attorney                       |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00           |  |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 2500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 18 / 27                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Reform Without Delay

|   |   |   |  |
|---|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> R. Timothy Hanlon  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 6 / 0 9 / 2 0 0 6 |  |
| Mailing Address 3609 Thornapple St.   |   | <b>Transaction ID:</b> C29509                                 |  |
| City State Zip Code<br>Chevy Chase MD 20815   | Amount of Each Receipt this Period<br>1000.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |  |
| Name of Employer N/A<br>Occupation Retired  | Aggregate Year-to-Date ▼<br>1000.00           |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Evelyn McNeil  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 6 / 2 5 / 2 0 0 6 |  |
| Mailing Address 40 North IH-35 No. 12D4   |  | <b>Transaction ID:</b> C29579                                 |  |
| City State Zip Code<br>Austin TX 78701  | Amount of Each Receipt this Period<br>250.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer N/A<br>Occupation Retired  | Aggregate Year-to-Date ▼<br>250.00           |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |   |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Neal Potter  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 6 / 0 9 / 2 0 0 6 |  |
| Mailing Address 6801 Brookville Rd.   |  | <b>Transaction ID:</b> C29521                                 |  |
| City State Zip Code<br>Chevy Chase MD 20815   | Amount of Each Receipt this Period<br>500.00 |   |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |
| Name of Employer N/A<br>Occupation Retired  | Aggregate Year-to-Date ▼<br>500.00           |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |   |  |

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

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 19 / 27                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Reform Without Delay

**A.** Full Name (Last, First, Middle Initial)  
Victoria L Bor

Mailing Address 7106 Ridgewood Ave.

City State Zip Code  
Chevy Chase MD 20815

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

Name of Employer Occupation  
Sherman, Dunn, Cohen, Leifer & Yel Attorney

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

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 25 / 2006

**Transaction ID: C29535**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Robert M Cooper

Mailing Address 5307 McKinley St.

City State Zip Code  
Bethesda MD 20814

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

Name of Employer Occupation  
Information Requested Information Requested

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

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 25 / 2006

**Transaction ID: C29542**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Thomas Mason

Mailing Address 7524 Hamptden Lane

City State Zip Code  
Bethesda MD 20814

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

Name of Employer Occupation  
Zuckerman Spaeder LLP Attorney

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

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 09 / 2006

**Transaction ID: C29618**

Amount of Each Receipt this Period  
1000.00

|  |   |         |
|--|---|---------|
| <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) or each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 20 / 27                 |
|  | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 13  | <input type="checkbox"/> 14  |
| <input type="checkbox"/> 15  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
Reform Without Delay

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

Mailing Address 10030 Kensington Parkway

City State Zip Code  
Kensington MD 20895

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

Name of Employer Occupation  
American Bar Association Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
06 / 25 / 2006

**Transaction ID: C29588**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
William C Schmeisser, Jr.

Mailing Address 11606 River Rd.

City State Zip Code  
Potomac MD 20854

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
06 / 25 / 2006

**Transaction ID: C29596**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Margaret C Ives

Mailing Address 130-D Seminary Ave.  
#321

City State Zip Code  
Auburndale MA 02466

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
06 / 09 / 2006

**Transaction ID: C29512**

Amount of Each Receipt this Period  
500.00

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 1500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 21 / 27                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Reform Without Delay

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

Mailing Address 118 Upshire Circle

City Gaithersburg State MD Zip Code 20878

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 25 / 2006

Transaction ID: C29530

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
John A Freedman

Mailing Address 3601 Connecticut Ave. NW Apt. 208

City Washington State DC Zip Code 20008

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

Name of Employer Information Requested Occupation Information Requested  
Arnold & Norik Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 25 / 2006

Transaction ID: C29554

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mary P Hauck

Mailing Address 4004 Dresden St.

City Kensington State MD Zip Code 20895

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 09 / 2006

Transaction ID: C29510

Amount of Each Receipt this Period  
1000.00

|  |   |         |
|--|---|---------|
| <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)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 22 / 27                 |
|  | (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)  
Reform Without Delay

|   |   |  |  |
|---|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Elizabeth C Olson  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 09 / 2006 |  |
| Mailing Address 3719 Bradley Lane   |   | <b>Transaction ID:</b> C29519                            |  |
| City State Zip Code<br>Chevy Chase MD 20815   | Amount of Each Receipt this Period<br>1000.00 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |  |  |
| Name of Employer<br>Kingsbury Center  | Occupation<br>Tutor                           |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00           |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Deanna Berkson   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 25 / 2006 |  |
| Mailing Address 7379 Sarimento Place  |  | <b>Transaction ID:</b> C29531                            |  |
| City State Zip Code<br>Del Ray Beach FL 33446   | Amount of Each Receipt this Period<br>500.00 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |  |  |
| Name of Employer<br>N/A   | Occupation<br>Retired                        |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00           |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b> Samuel J Kecker  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 25 / 2006 |  |
| Mailing Address 5610 Wisconsin Ave.<br>#702   |  | <b>Transaction ID:</b> C29568                            |  |
| City State Zip Code<br>Chevy Chase MD 20815   | Amount of Each Receipt this Period<br>500.00 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |  |  |
| Name of Employer<br>N/A   | Occupation<br>Retired                        |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00           |  |  |

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

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

|  |                              |                              |                             |                             |
|--|------------------------------|------------------------------|-----------------------------|-----------------------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             |                              | PAGE 23 / 27                |                             |
|  | (check only one)             |                              |                             |                             |
| <input checked="" type="checkbox"/> 11a                                      | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 |
| <input type="checkbox"/> 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)  
Reform Without Delay

**A.** Full Name (Last, First, Middle Initial)  
Thomas H Milch

Mailing Address 3839 Livingston St. NW

City State Zip Code  
Washington DC 20015

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

Name of Employer Occupation  
Arnold & Porter Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 2 | 5 | / | 2 | 0 | 0 | 6 |

Transaction ID: C29580

Amount of Each Receipt this Period  
500.00

|  |   |          |
|--|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 500.00   |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | 45600.00 |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |                              |   |
|--|------------------------------|---|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 24 / 27                            |
|  | (check only one)             |   |
| <input type="checkbox"/> 11a   | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c |
| <input type="checkbox"/> 12  | <input type="checkbox"/> 13  | <input type="checkbox"/> 14             |
| <input type="checkbox"/> 15  | <input type="checkbox"/> 16  | <input type="checkbox"/> 17             |

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|   |
|---|
| NAME OF COMMITTEE (In Full)<br>Reform Without Delay |
|---|

|   |                                     |
|---|-------------------------------------|
| A. Full Name (Last, First, Middle Initial)<br>Fulbright & Jaworski LLP Federal Committee  |                                     |
| Mailing Address 1301 McKinney<br>Suite 5100   |                                     |
| City<br>Houston   | State<br>TX                         |
| Zip Code<br>77010   |                                     |
| FEC ID number of contributing<br>federal political committee.   | <b>C</b> C00149013                  |
| Name of Employer  | Occupation                          |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1000.00 |

|  |
|--|
| Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 25 / 2006 |
| Transaction ID: C29551                                   |
| Amount of Each Receipt this Period<br>1000.00            |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 1000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | 1000.00 |



# 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)

PAGE 25 / 27

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

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NAME OF COMMITTEE (In Full)  
Reform Without Delay

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Peake Delancey Printing</b>   |  | <b>Transaction ID: D17</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 6 / 0 8 / 2 0 0 6 |
| Mailing Address 2500 Schuster Dr.  |  | Amount of Each Disbursement this Period<br>5908.49   |
| City Cheverly State MD Zip Code 20781  | Purpose of Disbursement Postage<br>Candidate Name  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Evans &amp; Katz LLC</b>  |  | <b>Transaction ID: D13</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 0 / 2 0 0 6 |
| Mailing Address 1831 Bay St. SE  |  | Amount of Each Disbursement this Period<br>771.63  |
| City Washington State DC Zip Code 20003  | Purpose of Disbursement Compliance Services<br>Candidate Name  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Evans &amp; Katz LLC</b>  |  | <b>Transaction ID: D14</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 5 / 0 4 / 2 0 0 6 |
| Mailing Address 1831 Bay St. SE  |  | Amount of Each Disbursement this Period<br>501.54  |
| City Washington State DC Zip Code 20003  | Purpose of Disbursement Compliance Services<br>Candidate Name  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 7181.66 |
| <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 26 / 27

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

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NAME OF COMMITTEE (In Full)  
Reform Without Delay

|  |  |   |
|--|--|---|
| <b>A. Evans &amp; Katz LLC</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1831 Bay St. SE<br>City Washington State DC Zip Code 20003<br>Purpose of Disbursement Compliance Services<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D16</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 6 / 0 5 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>40.00<br>Category/Type |
|--|--|---|

|   |  |   |
|---|--|---|
| <b>B. Cheryl Weiner</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 4248 50th St. NW<br>City Washington State DC Zip Code 20016<br>Purpose of Disbursement Catering<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D22</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 6 / 2 5 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>1500.00<br>* in-kind received<br>Category/Type |
|---|--|---|

|   |  |  |
|---|--|--|
| <b>C. NGP Software, Inc.</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1101 Vermont Ave., N.W.<br>City Washington State DC Zip Code 20005<br>Purpose of Disbursement Software Support<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | <b>Transaction ID: D15</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 6 / 0 5 / 2 0 0 6<br>Amount of Each Disbursement this Period<br>150.00<br>Category/Type |
|---|--|--|

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>1690.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <b>8871.66</b> |

# 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 27 / 27

|                              |  |                              |                              |                             |                              |
|------------------------------|--|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" 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)  
Reform Without Delay

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Lampson for Congress</b>  |  | <b>Transaction ID: D19</b><br>Date of Disbursement<br>06 / 29 / 2006 |
| Mailing Address P.O. Box 58606   |  | Amount of Each Disbursement this Period<br>987.83                    |
| City Houston State TX Zip Code 77258   | Purpose of Disbursement<br>Joint Fundraising Proceeds<br>Candidate Name  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/<br>Type  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Lampson for Congress</b>  |  | <b>Transaction ID: D20</b><br>Date of Disbursement<br>06 / 29 / 2006 |
| Mailing Address P.O. Box 58606   |  | Amount of Each Disbursement this Period<br>17000.00                  |
| City Houston State TX Zip Code 77258   | Purpose of Disbursement<br>Joint Fundraising Proceeds<br>Candidate Name  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/<br>Type  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Victory NOW PAC</b>   |  | <b>Transaction ID: D21</b><br>Date of Disbursement<br>06 / 30 / 2006 |
| Mailing Address 10605 Concord St.  |  | Amount of Each Disbursement this Period<br>20000.00                  |
| City Kensington State MD Zip Code 20895  | Purpose of Disbursement<br>Joint Fundraising Proceeds<br>Candidate Name  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/<br>Type  |

|  |                 |
|--|-----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>37987.83</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | <b>37987.83</b> |