

# 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  
Alaska Democratic Party

ADDRESS (number and street) PO Box 231230  
 Check if different than previously reported. (ACC)  
Anchorage AK 99523

2. **FEC IDENTIFICATION NUMBER** C00191247  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on 11 07 2006 in the State of AK  
(d) 30-Day **Post -Election** Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on in the State of

5. Covering Period 10 01 2006 through 10 18 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 Jayson Smart  
Signature of Treasurer Electronically Filed by Jayson Smart Date 04 28 2007

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Alaska Democratic Party

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	0

D	D
1	8

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		30145.89
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	107915.74									
(c) Total Receipts (from Line 19) .....	41008.00	362769.21								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	148923.74	392915.10								
7. Total Disbursements (from Line 31) .....	95380.05	339371.41								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	53543.69	53543.69								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	52956.10									

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  
Alaska Democratic Party

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	0

D	D
1	8

Y	Y	Y	Y
2	0	0	6

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) .....	34620.00	194038.42
(ii) Unitemized .....	1210.00	82494.17
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	35830.00	276532.59
(b) Political Party Committees .....	0.00	43055.02
(c) Other Political Committees (such as PACs) .....	5000.00	13500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	40830.00	333087.61
12. Transfers From Affiliated/Other Party Committees .....	0.00	5213.03
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) .....	178.00	4268.57
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	20200.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	20200.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	41008.00	362769.21
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	41008.00	342569.21

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	736.51	9019.32
(ii) Non-Federal Share.....	4173.46	51108.53
(b) Other Federal Operating Expenditures.....	6830.96	166456.77
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	11740.93	226584.62
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	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	700.00
(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	700.00
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 .....	3904.90	4384.90
(ii) "Levin" Share .....	22127.76	24847.76
(b) Federal Election Activity Paid Entirely With Federal Funds .....	57606.46	82854.13
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	83639.12	112086.79
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	95380.05	339371.41
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	69078.83	263415.12

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	40830.00	333087.61
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	700.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	40830.00	332387.61
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	7567.47	175476.09
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	178.00	4268.57
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	7389.47	171207.52

**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 / 70
	<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)  
Alaska Democratic Party

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

Mailing Address 3160 W 71St Ave

City Anchorage State AK Zip Code 99502

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 0 3 / 2 0 0 6

Transaction ID: 11 ai-000006636

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
Willie Anderson

Mailing Address 8443 Kimberly St

City Juneau State AK Zip Code 99801

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

Name of Employer NEA-AK Occupation Union Rep

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 0 4 / 2 0 0 6

Transaction ID: 11 ai-000006639

Amount of Each Receipt this Period  
 225.00

**C.** Full Name (Last, First, Middle Initial)  
Sharon Clawson

Mailing Address 5010 Abbott Road

City Anchorage State AL Zip Code 99507

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

Name of Employer Retired Occupation retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 0 4 / 2 0 0 6

Transaction ID: 11 ai-000006640

Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	350.00
<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 / 70
	<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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A.</b> Mary Ann Eininger		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 2290 Patterson Ln.		Transaction ID: 11 ai-000006641	
City State Zip Code North Pole AK 99705-5155	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired	Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Martha Siebe		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 8700 Solar Dr		Transaction ID: 11 ai-000006643	
City State Zip Code Anchorage AK 99507	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Univ. of Idaho	Occupation Interviewer	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Rita Allee		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 750 8th Ave		Transaction ID: 11 ai-000006644	
City State Zip Code Fairbanks AK 99701-4402	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Attorney	Aggregate Year-to-Date ▼ 1600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	130.00
<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 8 / 70
	<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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A.</b> Carol Anderson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 202 Hermit St.		<b>Transaction ID:</b> 11 ai-000006645
City State Zip Code Juneau AK 99801-1573	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Stosh Anderson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 3964 Cliffside Rd.		<b>Transaction ID:</b> 11 ai-000006646
City State Zip Code Kodiak AK 99615	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Self Fisherman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C.</b> John Angell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address Po Box 671809		<b>Transaction ID:</b> 11 ai-000006647
City State Zip Code Chugiak AK 99567	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation N / A Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	75.00
<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 / 70
	<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)  
Alaska Democratic Party

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

Mailing Address Po Box 201348

City Anchorage State AK Zip Code 99520

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

Name of Employer Self Occupation Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 0 4 / 2 0 0 6

Transaction ID: 11 ai-000006648

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 29785 Seward Hwy.

City Seward State AK Zip Code 99664-9502

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

Name of Employer Wilder Const. Co Occupation Operating Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 0 4 / 2 0 0 6

Transaction ID: 11 ai-000006649

Amount of Each Receipt this Period  
 10.00

**C.** Full Name (Last, First, Middle Initial)  
Lorraine Bayer

Mailing Address Po Box 240044

City Douglas State AK Zip Code 99824

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 Y  
 1 0 / 0 4 / 2 0 0 6

Transaction ID: 11 ai-000006650

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 110.00

**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 10 / 70
	<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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A.</b> Mark Begich		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 6447 Colgate Dr.		<b>Transaction ID:</b> 11 ai-000006651
City State Zip Code Anchorage AK 99504-3306	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Municipality of Anchorage Occupation Mayor	Aggregate Year-to-Date ▼ 1850.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Thomas Begich		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address Po Box 142711		<b>Transaction ID:</b> 11 ai-000006652
City State Zip Code Anchorage AK 99514-2711	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Consultant	Aggregate Year-to-Date ▼ 550.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Ruth Benson		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 1551 Farmers Loop		<b>Transaction ID:</b> 11 ai-000006654
City State Zip Code Fairbanks AK 99709	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer N/A Occupation Retired	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	175.00
<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 11 / 70
	<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)  
Alaska Democratic Party

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

Mailing Address P.O. Box 2888

City Palmer State AL Zip Code 99645

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

Name of Employer None 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 Y  
 1 0 / 0 4 / 2 0 0 6

Transaction ID: 11 ai-000006655

Amount of Each Receipt this Period  
 25.00

**B.** Full Name (Last, First, Middle Initial)  
Alison Biastock

Mailing Address 4441 Southpark Bluff Dr

City Anchorage State AK Zip Code 99517

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

Name of Employer State of Alaska Occupation Legislative Aide

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 0 4 / 2 0 0 6

Transaction ID: 11 ai-000006656

Amount of Each Receipt this Period  
 10.00

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

Mailing Address 1571 Nelchina St #B 9

City Anchorage State AK Zip Code 99501

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

Name of Employer AK Native Medical Center Occupation RN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 0 4 / 2 0 0 6

Transaction ID: 11 ai-000006658

Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	60.00
<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 12 / 70
	<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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A. Deborah Bonito</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address Po Box 200445		<b>Transaction ID: 11 ai-000006659</b>	
City State Zip Code Anchorage AK 99520		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Retail Sales			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) <b>B. Michael Bradner</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 3037 South Cir.		<b>Transaction ID: 11 ai-000006661</b>	
City State Zip Code Anchorage AK 99507-3956		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Writer / Publisher			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. Kelly Brown</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 814 Austin St		<b>Transaction ID: 11 ai-000006662</b>	
City State Zip Code Fairbanks AK 99701		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME Local 52 Occupation Business Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 775.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	200.00
<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 / 70
	<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)  
Alaska Democratic Party

<b>A.</b> Full Name (Last, First, Middle Initial) Kay Brown		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 2141 Esquire Dr		<b>Transaction ID:</b> 11 ai-000006663
City Anchorage State AK Zip Code 99517	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer DNC Occupation Alaska Communications Director	Aggregate Year-to-Date ▼ 425.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b> Full Name (Last, First, Middle Initial) Nina Brudie		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 7135 Crawford		<b>Transaction ID:</b> 11 ai-000006664
City Anchorage State AK Zip Code 99502	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer SOA Dept of Natural Resources Occupation Specialist	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b> Full Name (Last, First, Middle Initial) Debby Burwen		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 1133 M Court		<b>Transaction ID:</b> 11 ai-000006668
City Anchorage State AL Zip Code 99501	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Fish & Game Occupation Biologist	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	65.00
<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 14 / 70
	<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)  
Alaska Democratic Party

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

Mailing Address 1924 S Salem Dr

City Anchorage State AK Zip Code 99508-5159

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

Name of Employer Self Occupation Contractor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
10 / 04 / 2006

Transaction ID: 11 ai-000006669

Amount of Each Receipt this Period  
100.00

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

Mailing Address 14742 E Lake Ridge Drive

City Eagle River State AK Zip Code 99577

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

Name of Employer UNITED AIRLINES Occupation Pilot

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
10 / 04 / 2006

Transaction ID: 11 ai-000006671

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Diane Carpenter

Mailing Address 1504 I St

City Anchorage State AK Zip Code 99501

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

Name of Employer Self Occupation Hotel Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
10 / 04 / 2006

Transaction ID: 11 ai-000006672

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	200.00
<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 15 / 70
	(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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A.</b> Matthew Claman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address Po Box 100094		<b>Transaction ID:</b> 11 ai-000006674
City Anchorage	State AK	Zip Code 99510
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer Mendel & Assoc.	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mary Combs		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address Po Box 1108		<b>Transaction ID:</b> 11 ai-000006675
City Palmer	State AK	Zip Code 99645
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer Combs Insurance	Occupation Agent/Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Chris Cooke		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 4625 Emerald Cir		<b>Transaction ID:</b> 11 ai-000006677
City Anchorage	State AK	Zip Code 99502
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer Self	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	125.00
<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 16 / 70
	<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)  
Alaska Democratic Party

<b>A.</b> Full Name (Last, First, Middle Initial) Helen Coumbe Mailing Address 7893 Highlander Dr City Anchorage State AK Zip Code 99518 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6 <b>Transaction ID:</b> 11 ai-000006678 Amount of Each Receipt this Period 50.00
Name of Employer N/A Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Michael Coumbe Mailing Address Po Box 240343 City Anchorage State AK Zip Code 99524-0343 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6 <b>Transaction ID:</b> 11 ai-000006679 Amount of Each Receipt this Period 50.00
Name of Employer Alaska Democratic Party Occupation Executive Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 883.42		

<b>C.</b> Full Name (Last, First, Middle Initial) Bob Covington Mailing Address 3350 N Clark Wolverine Rd City Palmer State AK Zip Code 99645 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6 <b>Transaction ID:</b> 11 ai-000006680 Amount of Each Receipt this Period 100.00
Name of Employer N/A Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1425.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	200.00
<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 17 / 70
	<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)  
Alaska Democratic Party

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

Mailing Address 2611 Sorbus Cir.

City Anchorage State AK Zip Code 99508-4048

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

Name of Employer RBA Engineers Occupation Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
425.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	4	/	2	0	0	6

Transaction ID: 11 ai-000006681

Amount of Each Receipt this Period  
25.00

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

Mailing Address 1998 Kittiwake Dr

City Fairbanks State AL Zip Code 99709

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

Name of Employer Cold Climate Research Center Occupation Research

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	4	/	2	0	0	6

Transaction ID: 11 ai-000006682

Amount of Each Receipt this Period  
20.00

**C.** Full Name (Last, First, Middle Initial)  
Ed Davis

Mailing Address 3110 Bunch Berry Ln.

City Fairbanks State AK Zip Code 99709-2353

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

Name of Employer Alyeska Pipeline Occupation Technician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	4	/	2	0	0	6

Transaction ID: 11 ai-000006683

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	70.00
<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 / 70
	<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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A.</b> Diane Disanto		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 2246 Susitna Dr		<b>Transaction ID:</b> 11 ai-000006684	
City Anchorage	State AK	Zip Code 99517	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Muni of Anchorage	Occupation Special Assistant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Lynn Dixon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 7530 Labrador Cir		<b>Transaction ID:</b> 11 ai-000006685	
City Anchorage	State AK	Zip Code 99502	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Cook Inlet Books	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Claudia Douglas		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address Po Box 870628		<b>Transaction ID:</b> 11 ai-000006687	
City Wasilla	State AK	Zip Code 99687	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer None	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<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: <span style="float: right;">PAGE 19 / 70</span>
	(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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A.</b> Harriet Drummond		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 2139 Hillcrest Pl		<b>Transaction ID:</b> 11 ai-000006688	
City State Zip Code Anchorage AK 99503		Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Graphic Design			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 685.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Lloyd Eggan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 6731 Crooked Tree Dr.		<b>Transaction ID:</b> 11 ai-000006691	
City State Zip Code Anchorage AK 99507-7004		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C			
Name of Employer State of Alaska Occupation Computer Analyst			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> J. Renee Elliott		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 1500 Cache Dr		<b>Transaction ID:</b> 11 ai-000006692	
City State Zip Code Anchorage AK 99507		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer BLM Occupation Carto Tech			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	160.00
<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: <span style="float: right;">PAGE 20 / 70</span>
	(check only one)
<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

**A.** Full Name (Last, First, Middle Initial)  
Johnny Ellis, Jr

Mailing Address 1241 Denali St.

City Anchorage State AK Zip Code 99501-6508

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

Name of Employer State of Alaska Occupation Senator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt  
MM / DD / YYYY  
10 / 04 / 2006

Transaction ID: 11 ai-000006693

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Nicole Ertischek

Mailing Address 6515 Cimarron Cir.

City Anchorage State AK Zip Code 99504-3944

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

Name of Employer ASD Occupation Principal

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
10 / 04 / 2006

Transaction ID: 11 ai-000006694

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Steve Ex

Mailing Address 18243 McCrary Rd.

City Eagle River State AK Zip Code 99577-7914

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

Name of Employer Anchorage School District Occupation Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
10 / 04 / 2006

Transaction ID: 11 ai-000006695

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>100.00</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: <span style="float: right;">PAGE 21 / 70</span>
	(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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A.</b> Jake Feasel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 244 E Dowling Rd		<b>Transaction ID:</b> 11 ai-000006697	
City State Zip Code Anchorage AK 99518	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Tatitlek Support Services, Inc	Occupation Softward		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Hollis French, II		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 2640 Telequana Dr		<b>Transaction ID:</b> 11 ai-000006699	
City State Zip Code Anchorage AK 99517	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer State of Alaska	Occupation Senator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Kari Gardey		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 7240 Stamps Cir.		<b>Transaction ID:</b> 11 ai-000006700	
City State Zip Code Anchorage AK 99507-6751	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N / A	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	175.00
<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 22 / 70
	<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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A.</b> Martha Ginsburg		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 2600 Redwood St		<b>Transaction ID:</b> 11 ai-000006701
City Anchorage	State AK	Zip Code 99508
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer Municipality of Anchorage	Occupation Marketing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Don Gray		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 399 Hillside Dr		<b>Transaction ID:</b> 11 ai-000006702
City Fairbanks	State AK	Zip Code 99712
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 10.00
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Susanne L. Green		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 8301 Ginami Cir		<b>Transaction ID:</b> 11 ai-000006704
City Anchorage	State AK	Zip Code 99516
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer AK Conservation Foundation	Occupation program officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	60.00
<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 23 / 70
	<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)  
Alaska Democratic Party

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

Mailing Address 2512 St Elias Dr

City Anchorage State AK Zip Code 99517

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

Name of Employer State of AK Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 256.67

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 6

Transaction ID: 11 ai-000006705

Amount of Each Receipt this Period  
10.00

**B.** Full Name (Last, First, Middle Initial)  
Gretchen Guess

Mailing Address 7011 Howard Ave

City Anchorage State AK Zip Code 99508

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 6

Transaction ID: 11 ai-000006706

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Elyse M. Guttenberg

Mailing Address Po Box 81622

City Fairbanks State AK Zip Code 99701-1622

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

Name of Employer Fairbanks Native Association Occupation Administrator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 6

Transaction ID: 11 ai-000006708

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 60.00

**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 24 / 70		
	<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)  
Alaska Democratic Party

<b>A.</b> Full Name (Last, First, Middle Initial) Franklin Gwartney Mailing Address 3000 Bridle Ln. City Anchorage State AK Zip Code 99517-1470 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 6 <b>Transaction ID:</b> 11 ai-000006709 Amount of Each Receipt this Period 50.00
Name of Employer None Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1800.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Patricia C. Higgins Mailing Address 9140 Granite Pl. City Anchorage State AK Zip Code 99507-3947 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 6 <b>Transaction ID:</b> 11 ai-000006715 Amount of Each Receipt this Period 35.00
Name of Employer Self Occupation Realtor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Katie Hurley Mailing Address Po Box 871057 City Wasilla State AK Zip Code 99687 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 6 <b>Transaction ID:</b> 11 ai-000006716 Amount of Each Receipt this Period 35.00
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	120.00
<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 25 / 70
	<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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A.</b> Christopher Jensen		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 7100 Hillside Way		<b>Transaction ID:</b> 11 ai-000006718	
City Anchorage	State AK	Zip Code 99516	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Network Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Marjorie Kaiser		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 938 David Pl		<b>Transaction ID:</b> 11 ai-000006721	
City Anchorage	State AK	Zip Code 99501	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Cpa		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Virginia King-Taylor		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 3201 E Elderberry Dr		<b>Transaction ID:</b> 11 ai-000006724	
City Wasilla	State AK	Zip Code 99654	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N / A	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 530.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	70.00
<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: <span style="float: right;">PAGE 26 / 70</span>
	(check only one)
<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"/>	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A.</b> Dana Krawchuk		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 4823 B Villanova Drive		<b>Transaction ID:</b> 11 ai-000006728	
City State Zip Code Fairbanks AK 99709	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer AK Democratic Party	Occupation Staff		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Karol Libbey		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 14901 Wildien Dr.		<b>Transaction ID:</b> 11 ai-000006732	
City State Zip Code Anchorage AK 99516-3968	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N / A	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Jane Little		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 217 Skyline Dr		<b>Transaction ID:</b> 11 ai-000006733	
City State Zip Code Homer AK 99603	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer self	Occupation Business Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	175.00
<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 27 / 70
	(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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A.</b> Lou Anne Maxwell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 1780 Thuja Ave		<b>Transaction ID:</b> 11 ai-000006736	
City State Zip Code Anchorage AK 99507		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C			
Name of Employer n/a Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Barbara May		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 116 5Th St.		<b>Transaction ID:</b> 11 ai-000006737	
City State Zip Code Douglas AK 99824-5501		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer N / A Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Kathleen Mayo		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 1618 Kassi Ct.		<b>Transaction ID:</b> 11 ai-000006738	
City State Zip Code Fairbanks AK 99709-4195		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer BLM Joint Pipeline Office Occupation Program Analyst			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	120.00
<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 28 / 70
	(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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A.</b> Rod McCoy		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 7749 Old Harbor		<b>Transaction ID:</b> 11 ai-000006739	
City Anchorage	State AK	Amount of Each Receipt this Period 25.00	
Zip Code 99504			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer None	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Barbara McDaniel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 1040 N Craig Stadler Lp		<b>Transaction ID:</b> 11 ai-000006740	
City Wasilla	State AK	Amount of Each Receipt this Period 10.00	
Zip Code 99654			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer BHSMS	Occupation Research Assistant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Roxy McDonagh		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 402 E 23Rd Ave		<b>Transaction ID:</b> 11 ai-000006741	
City Anchorage	State AK	Amount of Each Receipt this Period 20.00	
Zip Code 99503			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Bookkeeper		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	55.00
<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 29 / 70
	<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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A.</b> Joseph McKinnon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address P.O. Box 100416		<b>Transaction ID:</b> 11 ai-000006742	
City Anchorage	State AK	Zip Code 99510	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 430.00		

Full Name (Last, First, Middle Initial) <b>B.</b> James Metcalfe		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 1326 P Street		<b>Transaction ID:</b> 11 ai-000006743	
City Anchorage	State AK	Zip Code 99501	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer IBEW 1547	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1110.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Kathleen Metcalfe		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 6624 Imlach Dr.		<b>Transaction ID:</b> 11 ai-000006744	
City Anchorage	State AK	Zip Code 99502-2158	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer State of Alaska	Occupation Research Assistant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	225.00
<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 30 / 70
	(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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A.</b> Kimberly Metcalfe - Helmar		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 730 Gold St		Transaction ID: 11 ai-000006745	
City State Zip Code Juneau AK 99801	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer ASEA/AFSCME Local 52	Occupation Business Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00		

Full Name (Last, First, Middle Initial) <b>B.</b> April Moore		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 1027 9th Ave.		Transaction ID: 11 ai-000006747	
City State Zip Code Fairbanks AK 99701	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Maryellen Oman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 12951 Summer Cir		Transaction ID: 11 ai-000006750	
City State Zip Code Anchorage AK 99516	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sierra Club AK Field Office	Occupation Program Asst		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	225.00
<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 31 / 70
	<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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A.</b> Joan Owens		Date of Receipt MM / DD / YYYY 10 / 04 / 2006
Mailing Address 1352 M St		<b>Transaction ID:</b> 11 ai-000006751
City Anchorage	State AK	Zip Code 99501
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 10.00
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Patrice Parker		Date of Receipt MM / DD / YYYY 10 / 04 / 2006
Mailing Address 1550 H St		<b>Transaction ID:</b> 11 ai-000006753
City Anchorage	State AK	Zip Code 99501
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer AK Works Partnership	Occupation Case manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) <b>C.</b> James Petersen		Date of Receipt MM / DD / YYYY 10 / 04 / 2006
Mailing Address 12602 Tanada Lp #Y		<b>Transaction ID:</b> 11 ai-000006755
City Anchorage	State AK	Zip Code 99515
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer Self	Occupation Property Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	60.00
<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 32 / 70						
	(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

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NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

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

Mailing Address 836 M St

City Anchorage State AK Zip Code 99501

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 ▼  
325.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 4 / 2 0 0 6

Transaction ID: 11 ai-000006756

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Fate Putman

Mailing Address Po Box 20473

City Juneau State AK Zip Code 99802

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

Name of Employer ASEA Occupation Lobbyist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
650.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 4 / 2 0 0 6

Transaction ID: 11 ai-000006757

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Janet Rader

Mailing Address 3044 Telequana Dr #4

City Anchorage State AK Zip Code 99517

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

Name of Employer John Havelock Occupation Secretary

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 4 / 2 0 0 6

Transaction ID: 11 ai-000006758

Amount of Each Receipt this Period  
20.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	95.00
<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 33 / 70
	<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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A.</b> David Ramseur		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 1440 E St. Apt 1		<b>Transaction ID:</b> 11 ai-000006759	
City Anchorage	State AK	Zip Code 99501	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Municipality of Anchorage	Occupation Chief Of Staff		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Daniel Repasky		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 2807 W 34th Ave		<b>Transaction ID:</b> 11 ai-000006762	
City Anchorage	State AK	Zip Code 99517	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer IBEW	Occupation Business Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Leslie Ridle		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 1210 E 16th Ave #2		<b>Transaction ID:</b> 11 ai-000006764	
City Anchorage	State AK	Zip Code 99501	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Municipality of Anchorage	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	100.00
<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 34 / 70
	<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)  
Alaska Democratic Party

A. Full Name (Last, First, Middle Initial) Shirley Rivas Mailing Address 7247 Duben Ave City Anchorage State AK Zip Code 99504 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6 <b>Transaction ID: 11 ai-000006765</b> Amount of Each Receipt this Period 50.00
Name of Employer N/A Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 775.00	

B. Full Name (Last, First, Middle Initial) Rhonda Roberts Mailing Address 2520 Resolution Dr City Anchorage State AK Zip Code 99517 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6 <b>Transaction ID: 11 ai-000006766</b> Amount of Each Receipt this Period 50.00
Name of Employer None Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1650.00	

C. Full Name (Last, First, Middle Initial) Jack Roderick Mailing Address 1620 Hidden Lane City Anchorage State AK Zip Code 99501 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6 <b>Transaction ID: 11 ai-000006767</b> Amount of Each Receipt this Period 50.00
Name of Employer Self Occupation Writer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<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 35 / 70
	<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)  
Alaska Democratic Party

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

Mailing Address Po Box 80690

City State Zip Code  
Fairbanks AK 99708

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

Name of Employer Information Insights Occupation Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 6

Transaction ID: 11 ai-000006768

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Kay Rollison

Mailing Address Po Box 243213

City State Zip Code  
Anchorage AK 99524

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

Name of Employer Self Occupation Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 6

Transaction ID: 11 ai-000006769

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Judith Salo

Mailing Address 4510 Kenaitze Ct

City State Zip Code  
Kenai AK 99611

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 ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 6

Transaction ID: 11 ai-000006770

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	125.00
<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 36 / 70
	<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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A.</b> Jean M. Sauget		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address PO Box 241813		<b>Transaction ID:</b> 11 ai-000006771
City Anchorage State AK Zip Code 99524	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Chugach Electric Occupation Computer programmer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	350.00

Full Name (Last, First, Middle Initial) <b>B.</b> William Sheffield		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 3125 Susitna View Ct		<b>Transaction ID:</b> 11 ai-000006773
City Anchorage State AK Zip Code 99517	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Port of Anchorage Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	1500.00

Full Name (Last, First, Middle Initial) <b>C.</b> Gerald Shelley		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 511 W 11Th St		<b>Transaction ID:</b> 11 ai-000006774
City Juneau State AK Zip Code 99801-1513	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer N / A Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	425.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	175.00
<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 37 / 70
	(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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A.</b> Jayson Smart		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 18751 Sarichef Loop		<b>Transaction ID:</b> 11 ai-000006775
City State Zip Code Eagle River AK 99577-8680	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Stone Soup Group	Occupation Exec. Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Robin Smith		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 14100 Jarvi Dr		<b>Transaction ID:</b> 11 ai-000006777
City State Zip Code Anchorage AK 99515	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer none	Occupation Activist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4105.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mary Spalding		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 10438 Ridge Park Dr.		<b>Transaction ID:</b> 11 ai-000006778
City State Zip Code Anchorage AK 99507-4576	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Alaska Commercial Company	Occupation Art Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	100.00
<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 38 / 70
	<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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A. Cindy Spanyers</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address Po Box 22859		Transaction ID: 11 ai-000006779	
City State Zip Code Juneau AK 99802		Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation APEA Special Projects Coordinator			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 425.00	

Full Name (Last, First, Middle Initial) <b>B. Jessica Spayd</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 17538 Laoana Ct.		Transaction ID: 11 ai-000006780	
City State Zip Code Eagle River AK 99577-8599		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Eagle River Pain & Wellness ANP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 425.00	

Full Name (Last, First, Middle Initial) <b>C. Ann Spohnholz</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 3810 Lynn Dr		Transaction ID: 11 ai-000006781	
City State Zip Code Anchorage AK 99508		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Self Consultant			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	90.00
<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 39 / 70
	<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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A.</b> Allan Tesche		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 1032 G Street		Transaction ID: 11 ai-000006783
City Anchorage	State AK	Zip Code 99501
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 75.00
Name of Employer Russell, Tesche, Wagg	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Valerie Therrien		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 779 8Th Ave		Transaction ID: 11 ai-000006784
City Fairbanks	State AK	Zip Code 99701
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer Self	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Anita Thorne		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 10611 Tahneeta Dr.		Transaction ID: 11 ai-000006788
City Anchorage	State AK	Zip Code 99507-6520
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer State of Alaska	Occupation Deputy Clerk	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	125.00
<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 40 / 70
	<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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A.</b> Peg Tileston		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 4780 Cambridge Way		<b>Transaction ID:</b> 11 ai-000006789	
City State Zip Code Anchorage AK 99503-7012	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Occupation Researcher	Aggregate Year-to-Date ▼ 540.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Chris Tuck		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 1950 Olympic Dr		<b>Transaction ID:</b> 11 ai-000006790	
City State Zip Code Anchorage AK 99515	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer IBEW 1547 Occupation Electrician	Aggregate Year-to-Date ▼ 450.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> David Valentine		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 4090 Krogstie Ln.		<b>Transaction ID:</b> 11 ai-000006791	
City State Zip Code Ester AK 99709-2019	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer UAF Occupation Professor	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	125.00
<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 41 / 70
	<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)  
Alaska Democratic Party

**A.** Full Name (Last, First, Middle Initial)  
Doug Van Etten

Mailing Address 3052 North Cir

City Anchorage State AK Zip Code 99507

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

Name of Employer Prudential Vista Occupation Realtor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 6

Transaction ID: 11 ai-000006792

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Eugene White

Mailing Address 137 W 12Th Ave

City Anchorage State AK Zip Code 99501

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

Name of Employer Chugach Electric Occupation Computer Work

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 6

Transaction ID: 11 ai-000006797

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Vanessa White

Mailing Address 211 H Street

City Anchorage State AK Zip Code 99501

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

Name of Employer self Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 6

Transaction ID: 11 ai-000006799

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 175.00

**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 42 / 70
	<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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A.</b> Janet Worrell		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 2428 Harbor Landing Cir.		Transaction ID: 11 ai-000006800	
City Anchorage State AK Zip Code 99515-2585		Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer None Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Michael Kenny		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 6	
Mailing Address 17016 Aries Ct.		Transaction ID: 11 ai-000007021	
City Anchorage State AK Zip Code 99516-5315		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1900.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Whatley Drake, LLC		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address PO Box 10647		Transaction ID: 11 ai-000006622	
City Birmingham State AL Zip Code 35202		Amount of Each Receipt this Period 10000.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 10000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	10225.00
<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 43 / 70
	<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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A. Joe Whatley</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address PO Box 10647		Transaction ID: 11 ai-000006623	
City Birmingham	State AL	Zip Code 35202	Amount of Each Receipt this Period 10000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Whatley Drake, LLC	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00		
<b>[MEMO ITEM]</b> Partner Share - Whatley Drake, LLC			

Full Name (Last, First, Middle Initial) <b>B. Crowley Douglas &amp; Norman, LLP</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 1301 McKinney #3500		Transaction ID: 11 ai-000006624	
City Houston	State TX	Zip Code 77010	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
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		
See Memo Items			

Full Name (Last, First, Middle Initial) <b>C. Tim Crowley</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 1301 McKinney Suite 3500		Transaction ID: 11 ai-000006819	
City Houston	State TX	Zip Code 77010	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Crowley, Douglas & Norman, LLP	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		
<b>[MEMO ITEM]</b> Partner Share - Crowley Douglas & Norman, LLP			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5000.00
<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 44 / 70
	<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)  
Alaska Democratic Party

**A.** Full Name (Last, First, Middle Initial)  
L.H. Johnston

Mailing Address 7927 Cranberry St

City Anchorage State AK Zip Code 99502

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 ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 6

Transaction ID: 11 ai-000006625

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Leif Selkregg

Mailing Address 935 Ashland Ave

City River Forest State IL Zip Code 60305-1433

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

Name of Employer RISE Alaska Occupation Program manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 6

Transaction ID: 11 ai-000006626

Amount of Each Receipt this Period  
10000.00

**C.** Full Name (Last, First, Middle Initial)  
Stephen Linneman

Mailing Address 2043 Wheeler St

City Woodridge State IL Zip Code 60517

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

Name of Employer Burns and McDonnell Occupation Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 6

Transaction ID: 11 ai-000006627

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	11050.00
<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 45 / 70
	(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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A.</b> Lewis Greenbaum		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 1302 N Sutton Pl		<b>Transaction ID:</b> 11 ai-000006628	
City State Zip Code Chicago IL 60610	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Katten Muchin	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> George Bourassa		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 5928 N Sauganash Ln		<b>Transaction ID:</b> 11 ai-000006629	
City State Zip Code Chicago IL 60646	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Carter Burgess	Occupation V P		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Lois Scott		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 1916 N Howe St		<b>Transaction ID:</b> 11 ai-000006630	
City State Zip Code Chicago IL 60614	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Scott Balice Strategies	Occupation senior managing director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1000.00
<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 46 / 70
	(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)  
Alaska Democratic Party

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

Mailing Address 1501 N State Pkwy #21D

City State Zip Code  
Chicago IL 60610

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

Name of Employer McDonough Associates, Inc. Occupation Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 6

Transaction ID: 11 ai-000006631

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
J J Hartman

Mailing Address 6828 N Tonty

City State Zip Code  
Chicago IL 60646

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

Name of Employer Burns and McDonnell Engineers Occupation Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 6

Transaction ID: 11 ai-000006632

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Terry Newman

Mailing Address 525 W Monroe St

City State Zip Code  
Chicago IL 60661

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

Name of Employer Katten Muchin Rosenman LLP Occupation Legal staff

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 6

Transaction ID: 11 ai-000006633

Amount of Each Receipt this Period  
250.00

<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 47 / 70
	<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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A.</b> Julia Garrigues		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 6
Mailing Address 2650 E. 50Th Ave		<b>Transaction ID:</b> 11 ai-000006609
City Anchorage	State AK	Amount of Each Receipt this Period 25.00
Zip Code 99507	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Lou Anne Maxwell		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 6
Mailing Address 1780 Thuja Ave		<b>Transaction ID:</b> 11 ai-000006808
City Anchorage	State AK	Amount of Each Receipt this Period 25.00
Zip Code 99507	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer n/a	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> John L. Alexander		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 6
Mailing Address 8311 Majestic Dr		<b>Transaction ID:</b> 11 ai-000006810
City Anchorage	State AK	Amount of Each Receipt this Period 20.00
Zip Code 99504	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	70.00
<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 48 / 70
	(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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A.</b> John Pugh		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 1011 D Street		<b>Transaction ID:</b> 11ai-000006805
City State Zip Code Juneau AK 99801	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer University of Alaska	Occupation Dean	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Toni London		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 21419 Rushing River Cir.		<b>Transaction ID:</b> 11ai-000006816
City State Zip Code Eagle River AK 99577-9414	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Army Corps of Engineers	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	34620.00



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 49 / 70	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full) Alaska Democratic Party
--

A. Full Name (Last, First, Middle Initial) IBEW COPE	
Mailing Address 900 Seventh St NW	
City Washington	State DC
Zip Code 20001	
FEC ID number of contributing federal political committee. <b>C</b>	
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

Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Transaction ID: 11c-000006813
Amount of Each Receipt this Period 5000.00

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

**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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A. Michael Coumbe</b>		<b>Transaction ID:</b> 21b-01-01522-01730 Date of Disbursement 10 / 01 / 2006
Mailing Address PO Box 240343		Amount of Each Disbursement this Period 1884.75
City Anchorage State AK Zip Code 99524	Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Internal Revenue Service</b>		<b>Transaction ID:</b> 21b-01-01525-01734 Date of Disbursement 10 / 02 / 2006
Mailing Address		Amount of Each Disbursement this Period 806.50
City Ogden State UT Zip Code 84201	Purpose of Disbursement payroll taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Key Bank</b>		<b>Transaction ID:</b> 21b-01-01539-01751 Date of Disbursement 10 / 12 / 2006
Mailing Address 101 W Benson		Amount of Each Disbursement this Period 234.32
City Anchorage State AK Zip Code 99503	Purpose of Disbursement credit card fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

2925.57

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A. AK Dept of Labor</b>		<b>Transaction ID:</b> 21b-01-01542-01761 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address PO Box 25506		Amount of Each Disbursement this Period 582.49
City Juneau State AK Zip Code 99802	Purpose of Disbursement payroll taxes Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Michael Coumbe</b>		<b>Transaction ID:</b> 21b-01-01544-01763 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address PO Box 240343		Amount of Each Disbursement this Period 1884.75
City Anchorage State AK Zip Code 99524	Purpose of Disbursement payroll Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Michael Coumbe</b>		<b>Transaction ID:</b> 21b-01-01549-0000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address PO Box 240343		Amount of Each Disbursement this Period 335.10
City Anchorage State AK Zip Code 99524	Purpose of Disbursement See Memo Items Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2802.34
<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 52 / 70

<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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A. Princess Alaska Lodges</b>		<b>Transaction ID:</b> 21b-01-01549-01789 Date of Disbursement 10 / 16 / 2006
Mailing Address 2815 Second Ave #400		Amount of Each Disbursement this Period 191.73
City Seattle State WA Zip Code 98121	Purpose of Disbursement hotel charges for meeting Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. Lowe's</b>		<b>Transaction ID:</b> 21b-01-01549-01768 Date of Disbursement 10 / 16 / 2006
Mailing Address 333 E Tudor		Amount of Each Disbursement this Period 4.17
City Anchorage State AK Zip Code 99503	Purpose of Disbursement repair parts Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. Dollar Rent A Car</b>		<b>Transaction ID:</b> 21b-01-01549-01787 Date of Disbursement 10 / 16 / 2006
Mailing Address		Amount of Each Disbursement this Period 91.20
City Fairbanks State AK Zip Code	Purpose of Disbursement car rental Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

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

**SCHEDULE B (FEC Form 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)  
Alaska Democratic Party

<b>A. Stems</b> Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement committee member flowers Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 21b-01-01549-01788 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 Amount of Each Disbursement this Period 48.00 <b>[MEMO ITEM]</b>
--	--	--

<b>B. Kay Brown</b> Full Name (Last, First, Middle Initial) Mailing Address 2141 Esquire Dr City Anchorage State AK Zip Code 99517 Purpose of Disbursement See Memo Items Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 21b-01-01551-0000 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 Amount of Each Disbursement this Period 271.10
---	--	--

<b>C. Out of a J.A.M. Solutions</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 4379 City Palmer State AK Zip Code 99645 Purpose of Disbursement technical support Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 21b-01-01551-01786 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 Amount of Each Disbursement this Period 65.00 <b>[MEMO ITEM]</b>
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	271.10
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A. Eagle &amp; Yellow Cab</b>		<b>Transaction ID:</b> 21b-01-01551-01785	
Mailing Address		Date of Disbursement MM / DD / YYYY 10 / 16 / 2006	
City Fairbanks	State AK	Amount of Each Disbursement this Period 18.00	
Purpose of Disbursement cab fare	Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. Ted Stevens Int'l Airport</b>		<b>Transaction ID:</b> 21b-01-01551-01784	
Mailing Address Anchorage Airport		Date of Disbursement MM / DD / YYYY 10 / 16 / 2006	
City Anchorage	State AK	Amount of Each Disbursement this Period 11.00	
Purpose of Disbursement airport parking	Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	
State:	District:		

Full Name (Last, First, Middle Initial) <b>C. Alaska Airlines</b>		<b>Transaction ID:</b> 21b-01-01551-01770	
Mailing Address 4750 W. Int'l Airport Rd		Date of Disbursement MM / DD / YYYY 10 / 16 / 2006	
City Anchorage	State AK	Amount of Each Disbursement this Period 177.10	
Purpose of Disbursement travel to central comm. mtg.	Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]	
State:	District:		

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

# SCHEDULE B (FEC Form 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)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A. Patricia Rolfe</b>		<b>Transaction ID:</b> 21b-01-01559-0000 Date of Disbursement 10 / 16 / 2006	
Mailing Address 6848 Cape Lisburne Lp		Amount of Each Disbursement this Period 25.45	
City Anchorage State AK Zip Code 99504	Purpose of Disbursement See Memo Items 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) ▼		

Full Name (Last, First, Middle Initial) <b>B. Title Wave</b>		<b>Transaction ID:</b> 21b-01-01559-01778 Date of Disbursement 10 / 16 / 2006	
Mailing Address 1360 W Northern Lts		Amount of Each Disbursement this Period 25.45	
City Anchorage State AK Zip Code 99503	Purpose of Disbursement thank you cards and coffee cards 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) ▼		

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial) <b>C. Internal Revenue Service</b>		<b>Transaction ID:</b> 21b-01-01570-01802 Date of Disbursement 10 / 17 / 2006	
Mailing Address		Amount of Each Disbursement this Period 806.50	
City Ogden State UT Zip Code 84201	Purpose of Disbursement payroll taxes Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>831.95</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<b>6830.96</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)

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

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NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A. Angel Bunger</b>		<b>Transaction ID:</b> 30b-01-01521-01729 Date of Disbursement 10 / 01 / 2006	
Mailing Address 1001 W 12th Ave		Amount of Each Disbursement this Period 1537.80	
City Anchorage State AK Zip Code 99501	Purpose of Disbursement payroll	Category/ Type	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:           District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Patricia Rolfe</b>		<b>Transaction ID:</b> 30b-01-01524-01732 Date of Disbursement 10 / 01 / 2006	
Mailing Address 6848 Cape Lisburne Lp		Amount of Each Disbursement this Period 1504.96	
City Anchorage State AK Zip Code 99504	Purpose of Disbursement payroll	Category/ Type	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:           District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Internal Revenue Service</b>		<b>Transaction ID:</b> 30b-01-01525-01733 Date of Disbursement 10 / 02 / 2006	
Mailing Address		Amount of Each Disbursement this Period 1135.70	
City Ogden State UT Zip Code 84201	Purpose of Disbursement payroll taxes	Category/ Type	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:           District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4178.46</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A. State of Alaska</b>		<b>Transaction ID:</b> 30b-01-01528-01738 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6
Mailing Address 2221 E Northern Lts Rm 128		Amount of Each Disbursement this Period 320.00
City Anchorage State AK Zip Code 99508	Purpose of Disbursement absentee voter list 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Precision Communications Inc.</b>		<b>Transaction ID:</b> 30b-02-03400-04345 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6
Mailing Address 8601 George Ave Suite 806		Amount of Each Disbursement this Period 39313.55
City Silver Spring State MD Zip Code 20910	Purpose of Disbursement voter id calls 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. State of Alaska</b>		<b>Transaction ID:</b> 30b-05-00184-00184 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 2221 E Northern Lts Rm 128		Amount of Each Disbursement this Period 110.00
City Anchorage State AK Zip Code 99508	Purpose of Disbursement obtaining petition list Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	39743.55
<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)

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

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NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

<b>A. Postmaster</b> Full Name (Last, First, Middle Initial) Mailing Address 344 W. Third City Anchorage State AK Zip Code 99501 Purpose of Disbursement absentee recruitment mailer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 30b-02-03402-04347 <b>Date of Disbursement:</b> M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 <b>Amount of Each Disbursement this Period:</b> 5291.65 Category/Type
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<b>B. AK Dept of Labor</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 25506 City Juneau State AK Zip Code 99802 Purpose of Disbursement payroll taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 30b-01-01542-01760 <b>Date of Disbursement:</b> M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 <b>Amount of Each Disbursement this Period:</b> 486.00 Category/Type
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<b>C. Angel Bungler</b> Full Name (Last, First, Middle Initial) Mailing Address 1001 W 12th Ave City Anchorage State AK Zip Code 99501 Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 30b-01-01543-01762 <b>Date of Disbursement:</b> M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 <b>Amount of Each Disbursement this Period:</b> 1537.80 Category/Type
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7315.45
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

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

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NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial) <b>A. Color Art Printing</b>		<b>Transaction ID:</b> 30b-02-03404-04349 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 430 W. Seventh		Amount of Each Disbursement this Period 5420.00
City Anchorage State AK Zip Code 99501	Purpose of Disbursement absentee ballot mailers 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) ▼

Full Name (Last, First, Middle Initial) <b>B. Drummond Design</b>		<b>Transaction ID:</b> 30b-02-03405-04350 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 2139 Hillcrest Pl		Amount of Each Disbursement this Period 619.00
City Anchorage State AK Zip Code 99503	Purpose of Disbursement mailer design 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) ▼

Full Name (Last, First, Middle Initial) <b>C. Larson Graphics</b>		<b>Transaction ID:</b> 30b-02-03406-04351 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 1440 Wintergreen St		Amount of Each Disbursement this Period 330.00
City Anchorage State AK Zip Code 99508	Purpose of Disbursement absentee mailer design Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6369.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	57606.46

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor 34th and C Associates	Nature of Debt (Purpose): utilities
Mailing Address 200 W 34th Ave	
City State ZIP Code Anchorage AK 99503	

Outstanding Balance Beginning This Period 135.92	<b>Transaction ID: 10-000002</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 135.92

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor 34th and C Associates	Nature of Debt (Purpose): rent
Mailing Address 200 W 34th Ave	
City State ZIP Code Anchorage AK 99503	

Outstanding Balance Beginning This Period 4900.00	<b>Transaction ID: 10-000006</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4900.00

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor ADP Non Federal	Nature of Debt (Purpose): debt to non federal account
Mailing Address PO Box 231230	
City State ZIP Code Anchorage AK 99523	

Outstanding Balance Beginning This Period 47582.70	<b>Transaction ID: 10-000001</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 47582.70

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<b>52618.62</b>
<b>2) TOTALS</b> This Period (last page this line number only).....	
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 61 / 70	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor TelAlaska	Nature of Debt (Purpose): phone charges
Mailing Address PO Box 233609	
City State ZIP Code Anchorage AK 99523	

Outstanding Balance Beginning This Period	<b>Transaction ID: 10-000013</b>	
337.48		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	337.48

1) <b>SUBTOTALS</b> This Period This Page (optional).....	337.48
2) <b>TOTALS</b> This Period (last page this line number only).....	52956.10
3) <b>TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

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

NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

<b>A. Full Name (Last, First, Middle Initial)</b> Dana Krawchuk			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2008 Carr Ave			Allocated Activity or Event Year-To-Date 56157.12		
City Fairbanks	State AK	Zip Code 99709	Date <input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: payroll			Transaction ID: 21a-01-01523-01731		
Activity or Event Identifier: Admin 2005/2006					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
140.89		798.35		939.24

<b>B. Full Name (Last, First, Middle Initial)</b> Internal Revenue Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address (blank)			Allocated Activity or Event Year-To-Date 56396.42		
City Ogden	State UT	Zip Code 84201	Date <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: payroll taxes			Transaction ID: 21a-01-01525-01735		
Activity or Event Identifier: Admin 2005/2006					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.90		203.40		239.30

<b>C. Full Name (Last, First, Middle Initial)</b> Dana Krawchuk			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2008 Carr Ave			Allocated Activity or Event Year-To-Date 57643.02		
City Fairbanks	State AK	Zip Code 99709	Date <input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: payroll			Transaction ID: 21a-01-01545-01764		
Activity or Event Identifier: Admin 2005/2006					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
186.99		1059.61		1246.60

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
363.78		2061.36		2425.14

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

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

Mailing Address  
101 W Benson

City State Zip Code  
Anchorage AK 99503

Purpose of Disbursement:  
mortgage payment

Category/  
Type

Activity or Event Identifier:  
Admin 2005/2006

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

58571.23

Date 10 / 16 / 2006

Transaction ID: 21a-01-01548-01767

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
139.23		788.98		928.21

**B. Full Name (Last, First, Middle Initial)**  
Prudential Jack White Real Estate

Mailing Address  
3801 Centerpoint Dr #200

City State Zip Code  
Anchorage AK 99503

Purpose of Disbursement:  
building maintenance fees

Category/  
Type

Activity or Event Identifier:  
Admin 2005/2006

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

58872.73

Date 10 / 16 / 2006

Transaction ID: 21a-01-01550-01769

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.23		256.27		301.50

**C. Full Name (Last, First, Middle Initial)**  
State of Alaska

Mailing Address  
2221 E Northern Lts Rm 128

City State Zip Code  
Anchorage AK 99508

Purpose of Disbursement:  
business license renewal

Category/  
Type

Activity or Event Identifier:  
Admin 2005/2006

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

59072.73

Date 10 / 16 / 2006

Transaction ID: 21a-01-01552-01771

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.00		170.00		200.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
214.46		1215.25		1429.71

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

<b>A. Full Name (Last, First, Middle Initial)</b> APC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6470 East Johns Crossing Suite 100			Allocated Activity or Event Year-To-Date 59258.96		
City Duluth	State GA	Zip Code 30097	Date <input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: conference calls			Transaction ID: 21a-01-01553-01772		
Activity or Event Identifier: Admin 2005/2006					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.93		158.30		186.23

<b>B. Full Name (Last, First, Middle Initial)</b> Wells Fargo Financial			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 800 Walnut St			Allocated Activity or Event Year-To-Date 59393.47		
City Des Moines	State IA	Zip Code 50309	Date <input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: copier maintenance fee			Transaction ID: 21a-01-01554-01773		
Activity or Event Identifier: Admin 2005/2006					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.18		114.33		134.51

<b>C. Full Name (Last, First, Middle Initial)</b> Ohio Casualty Group			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 5001			Allocated Activity or Event Year-To-Date 59506.13		
City Hamilton	State OH	Zip Code 45012-5001	Date <input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: liability insurance			Transaction ID: 21a-01-01555-01774		
Activity or Event Identifier: Admin 2005/2006					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.90		95.76		112.66

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
65.01		368.39		433.40

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



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

NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

<b>A. Full Name (Last, First, Middle Initial)</b> Best Storage South			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2200 Gambell St			Allocated Activity or Event Year-To-Date 59615.13		
City	State	Zip Code	Date <input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2006"/>		
Anchorage	AK	99503	Transaction ID: 21a-01-01556-01775		
Purpose of Disbursement: storage unit fee			Category/ Type		
Activity or Event Identifier: Admin 2005/2006					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.35		92.65		109.00

<b>B. Full Name (Last, First, Middle Initial)</b> ACS			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Po Box 196666			Allocated Activity or Event Year-To-Date 59699.74		
City	State	Zip Code	Date <input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2006"/>		
Anchorage	AK	99519	Transaction ID: 21a-01-01557-01776		
Purpose of Disbursement: cell phone charges			Category/ Type		
Activity or Event Identifier: Admin 2005/2006					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.69		71.92		84.61

<b>C. Full Name (Last, First, Middle Initial)</b> International Telecom			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 230750			Allocated Activity or Event Year-To-Date 59767.35		
City	State	Zip Code	Date <input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2006"/>		
Anchorage	AK	99523	Transaction ID: 21a-01-01558-01777		
Purpose of Disbursement: long distance charges			Category/ Type		
Activity or Event Identifier: Admin 2005/2006					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.14		57.47		67.61

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.18		222.04		261.22

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

A. Full Name (Last, First, Middle Initial)  
Internal Revenue Service

Mailing Address

City State Zip Code  
Ogden UT 84201

Purpose of Disbursement:  
payroll taxes

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

60127.85

Activity or Event Identifier:  
Admin 2005/2006

Date 10 / 17 / 2006

Transaction ID: 21a-01-01570-01803

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
54.08		306.42		360.50

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
54.08		306.42		360.50

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
736.51	4173.46	4909.97

**SCHEDULE H6 (FEC Form 3X)  
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS  
FOR SHARED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full)

Alaska Democratic Party

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

Patricia Rolfe

Type of Allocated Activity or Event:

Voter Registration  GOTV  
 Voter ID  Generic Campaign

Mailing Address  
6848 Cape Lisburne Lp

Allocated Activity or Event Year-To-Date

4704.96

City Anchorage State AK Zip Code 99504

Purpose of Disbursement  
payroll

Category/  
Type

Date 10 / 16 / 2006

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT

225.74

1279.22

1504.96

Transaction ID: 30a-01-01546-01765

**B.** Full Name (Last ,First, Middle Initial) / Full Organization Name

Leila Wise and Associates

Type of Allocated Activity or Event:

Voter Registration  GOTV  
 Voter ID  Generic Campaign

Mailing Address  
1228 G St

Allocated Activity or Event Year-To-Date

28096.96

City Anchorage State AK Zip Code 99501

Purpose of Disbursement  
radio advertising

Category/  
Type

Date 10 / 16 / 2006

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT

3508.80

19883.20

23392.00

Transaction ID: 30a-01-01547-01766

**SUBTOTAL** of Shared Federal and Levin Activity This Page

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT

3734.54

21162.42

24896.96

**TOTAL** This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))

FEDERAL SHARE

TOTAL AMOUNT

LEVIN SHARE

**TOTAL** This Period for the Levin Share

**SCHEDULE H6 (FEC Form 3X)  
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS  
FOR SHARED FEDERAL ELECTION ACTIVITY**  
(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full)

Alaska Democratic Party

A. Full Name (Last, First, Middle Initial) / Full Organization Name

Internal Revenue Service

Type of Allocated Activity or Event:

- Voter Registration
- Voter ID
- GOTV
- Generic Campaign

Mailing Address

Allocated Activity or Event Year-To-Date

29232.66

City Ogden State UT Zip Code 84201

Purpose of Disbursement payroll taxes

Category/Type

Date 10 / 17 / 2006

FEDERAL SHARE

LEVIN SHARE

TOTAL AMOUNT

170.36

965.34

1135.70

Transaction ID: 30a-01-01570-01797

**SUBTOTAL** of Shared Federal and Levin Activity This Page

FEDERAL SHARE

LEVIN SHARE

TOTAL AMOUNT

170.36

965.34

1135.70

**TOTAL** This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))

FEDERAL SHARE

TOTAL AMOUNT

3904.90

LEVIN SHARE

26032.66

**TOTAL** This Period for the Levin Share

22127.76

**SCHEDULE L (FEC Form 3X)**

**AGGREGATION PAGE: LEVIN FUNDS**

Transaction ID: SL3

NAME OF COMMITTEE (In Full) Alaska Democratic Party
NAME OF ACCOUNT General

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... <small>(Use Schedule L-A)</small>	0.00	0.00
b. Unitemized.....	0.00	0.00
c. Total.....	0.00	0.00
2. OTHER RECEIPTS.....	0.00	0.00
3. TOTAL RECEIPTS..... <small>(Add Lines 1c and 2)</small>	0.00	0.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT <small>(Use Schedule L-B)</small>		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	0.00	0.00
6. TOTAL DISBURSEMENTS..... <small>(Add Lines 4e and 5)</small>	0.00	0.00
7. BEGINNING CASH ON HAND..... <small>(for Column B, use cash as of January 1st)</small>	0.00	0.00
8. RECEIPTS..... <small>(from Line 3)</small>	0.00	0.00
9. SUBTOTAL..... <small>(Add Lines 7 and 8)</small>	0.00	0.00
10. DISBURSEMENTS..... <small>(From Line 6)</small>	0.00	0.00
11. ENDING CASH ON HAND..... <small>(Subtract Line 10 From Line 9)</small>		0.00

Image# 27990034658

Form/Schedule: **F3XA**

Transaction ID:

Due to determining that two people were indeed the same person, itemized contributions increased and un-itemized contributions decreased. We are filing the following amended reports to show this correction: June Monthly 2006, July Monthly 2006, August Monthly 2006, September Monthly 2006, October Monthly 2006, Pre General 2006, Post General 2006, Year End 2006.

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