

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines.

12FE4M5

DONNA EDWARDS FOR CONGRESS

ADDRESS (number and street) ▼

P.O. Box 441153

Check if different than previously reported. (ACC)

FORT WASHINGTON

MD

20749

2. **FEC IDENTIFICATION NUMBER** ▼

C C00422964

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

MD

04

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

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

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on 04 / 03 / 2012 in the State of MD

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

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

Election on / / in the State of

5. Covering Period

01 / 01 / 2012 through 03 / 14 / 2012

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 Janice Edwards

Signature of Treasurer Janice Edwards

[Electronically Filed]

Date

01 / 29 / 2013

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

DONNA EDWARDS FOR CONGRESS

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	61649.82	573844.56
(b) Total Contribution Refunds (from Line 20(d))	35.00	35.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	61614.82	573809.56
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	73026.56	366160.62
(b) Total Offsets to Operating Expenditures (from Line 14).....	102.00	1737.88
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	72924.56	364422.74
8. Cash on Hand at Close of Reporting Period (from Line 27).....	218746.70	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	10020.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

DONNA EDWARDS FOR CONGRESS

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	17450.00	219807.03
(ii) Unitemized.....	5949.82	68788.53
(iii) TOTAL of contributions from individuals.....	23399.82	288595.56
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	38250.00	285249.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	61649.82	573844.56
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	5000.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	102.00	1737.88
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	61751.82	580582.44

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	73026.56	366160.62
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	41000.00	41000.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	35.00	35.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	35.00	35.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	114061.56	407195.62

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	271056.44
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	61751.82
25. SUBTOTAL (add Line 23 and Line 24).....	332808.26
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	114061.56
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	218746.70

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Katherine Brittain Bradley

Mailing Address 2211 30th Street NW

City Washington State DC Zip Code 20008

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

Name of Employer City Bridge Foundation Occupation CEO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 03 / 2012

Transaction ID : SA11AI.61610

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Jessica Brandt

Mailing Address 3386 E. River Road

City Tuscon State AZ Zip Code 85718

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

Name of Employer Retired Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 10 / 2012

Transaction ID : SA11AI.61697

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Vaughn Brown

Mailing Address 918 Heatherfield Lane

City Millersville State MD Zip Code 21108

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

Name of Employer Not Employed Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 25 / 2012

Transaction ID : SA11AI.61538

Amount of Each Receipt this Period
250.00

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

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

2250.00

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

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

FOR LINE NUMBER: PAGE 6 OF 55
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ardath Cade

Mailing Address 78 Riverside Drive

City State Zip Code
Severna Park MD 21146

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

Name of Employer Occupation
Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 13 / 2012

Transaction ID : SA11AI.61611

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Neil Didriksen

Mailing Address 11659 St. Davids Lane

City State Zip Code
Lutherville Timonium MD 21093

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

Name of Employer Occupation
Philanthropic Ventures Principal

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 07 / 2012

Transaction ID : SA11AI.61619

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
Edward Farnilant

Mailing Address

City State Zip Code

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

Name of Employer Occupation
Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 10 / 2012

Transaction ID : SA11AI.61698

Amount of Each Receipt this Period
1000.00

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

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

3650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Dalia Fateh

Mailing Address 2910 Woodland Drive

City Washington State DC Zip Code 20008

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

Name of Employer Salt Docs Occupation Filmmaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 16 / 2012

Transaction ID : SA11AI.61621

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Mark Ferrenz

Mailing Address 607 Deerfield Avenue

City Silver Spring State MD Zip Code 20910

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

Name of Employer None Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2012

Transaction ID : SA11AI.61252

Amount of Each Receipt this Period
 750.00

C. Full Name (Last, First, Middle Initial)
Mark Ferrenz

Mailing Address 607 Deerfield Avenue

City Silver Spring State MD Zip Code 20910

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

Name of Employer None Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 03 / 2012

Transaction ID : SA11AI.61490

Amount of Each Receipt this Period
 1000.00

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

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

750.00

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

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

FOR LINE NUMBER: PAGE 8 OF 55
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mark Ferrenz

Mailing Address 607 Deerfield Avenue

City State Zip Code
Silver Spring MD 20910

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

Name of Employer Occupation
None Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 03 / 2012

Transaction ID : SA11AI.61571

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
David Forman

Mailing Address 5344 Falmouth Road

City State Zip Code
Bethesda MD 20816

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

Name of Employer Occupation
Finnegan Patent Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
850.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 10 / 2012

Transaction ID : SA11AI.61388

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Susan Fulton

Mailing Address 1441 Swann Street NW

City State Zip Code
Washington DC 20009

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

Name of Employer Occupation
FBB Capital Partners Small Business Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 30 / 2012

Transaction ID : SA11AI.61456

Amount of Each Receipt this Period
25.00

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

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

325.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Susan Fulton

Mailing Address 1441 Swann Street NW

City Washington State DC Zip Code 20009

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

Name of Employer FBB Capital Partners Occupation Small Business Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **525.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2012

Transaction ID : SA11AI.61544

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Pamela Grissom

Mailing Address 11849 Cienega Crossing Place

City Vail State AZ Zip Code 85641

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

Name of Employer Retired Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2012

Transaction ID : SA11AI.61557

Amount of Each Receipt this Period
1750.00

C. Full Name (Last, First, Middle Initial)
Pamela Grissom

Mailing Address 11849 Cienega Crossing Place

City Vail State AZ Zip Code 85641

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

Name of Employer Retired Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **3050.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2012

Transaction ID : SA11AI.61858

Amount of Each Receipt this Period
550.00

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

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

2325.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Kristin Hull		Date of Receipt M M / D D / Y Y Y Y 01 / 01 / 2012	
Mailing Address 341 El Cerrito Avenue		Transaction ID : SA11AI.61128	
City Piedmont	State CA	Zip Code 94611	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Unemployed	Occupation Teacher		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) B. John Hunting		Date of Receipt M M / D D / Y Y Y Y 01 / 16 / 2012	
Mailing Address 161 Ottawa Avenue Suite 501-H		Transaction ID : SA11AI.61629	
City Grand Rapids	State MI	Zip Code 49503	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) C. Betsy Krieger		Date of Receipt M M / D D / Y Y Y Y 03 / 01 / 2012	
Mailing Address 411 Hawthorne Road		Transaction ID : SA11AI.61699	
City Baltimore	State MD	Zip Code 21210	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer None	Occupation Social Worker		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Timothy Lee

Mailing Address 2511 Bennington Drive

City San Bruno State CA Zip Code 94066

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

Name of Employer City & County of San Francisco Occupation Administrative Law Judge

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 08 / 2012

Transaction ID : SA11AI.61327

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Stephen Lerch

Mailing Address 3805 31st Street

City Mount Rainier State MD Zip Code 20712

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

Name of Employer Carl Vogel Center Occupation Social Worker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 07 / 2012

Transaction ID : SA11AI.61323

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Walter Ludwig

Mailing Address 1717 Lamont Street NW Apt. D

City Washington State DC Zip Code 20010

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

Name of Employer Underdog Politics Occupation Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 13 / 2012

Transaction ID : SA11AI.61633

Amount of Each Receipt this Period
500.00

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

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

850.00

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 12 OF 55

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Geraldine Mannion

Mailing Address 10 Melody Drive

City Colonia State NJ Zip Code 07067

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

Name of Employer Carnegie Corporation of NY Occupation Foundation Executive

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 30 / 2012

Transaction ID : SA11AI.61455

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Geraldine Mannion

Mailing Address 10 Melody Drive

City Colonia State NJ Zip Code 07067

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

Name of Employer Carnegie Corporation of NY Occupation Foundation Executive

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 2250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2012

Transaction ID : SA11AI.61543

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Steven Metalitz

Mailing Address 8007 Park Crest Road

City Silver Spring State MD Zip Code 20910

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

Name of Employer Mitchell Golberg Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2012

Transaction ID : SA11AI.61702

Amount of Each Receipt this Period
 100.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Karen Montgomery

Mailing Address 211 Market Street

City State Zip Code
Brookeville MD 20833

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

Name of Employer Occupation
State of Maryland State Delegate

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 10 / 2012

Transaction ID : SA11AI.61636

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Anita Nager

Mailing Address 157 Windsor Place

City State Zip Code
Brooklyn NY 11215

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

Name of Employer Occupation
Self-Employed Philanthropic Advisor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 05 / 2012

Transaction ID : SA11AI.61299

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Beverly Perry

Mailing Address 1716 Holly Street NW

City State Zip Code
Washington DC 20012

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

Name of Employer Occupation
Pepco Holdings, Inc Government Affairs and Public Policy

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 31 / 2012

Transaction ID : SA11AI.61642

Amount of Each Receipt this Period
250.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Patricia Pounds

Mailing Address 201 Riverside Road

City Edgewater State MD Zip Code 21037

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

Name of Employer Alexander & Cleaver Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 13 / 2012

Transaction ID : SA11A1.61646

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Joseph Rigby

Mailing Address 701 Ninth Street NW

City Washington State DC Zip Code 20068

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

Name of Employer Pepco Occupation Chairman of the Board

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 12 / 2012

Transaction ID : SA11A1.61693

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Royal Rodgers

Mailing Address 3120 Newark Street NW

City Washington State DC Zip Code 20008

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

Name of Employer RKR Media Occupation Filmmaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 03 / 2012

Transaction ID : SA11A1.61655

Amount of Each Receipt this Period
 500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

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

Mailing Address 210 Central Park Couth
15B

City State Zip Code
New York NY 10019

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

Name of Employer Occupation
Sagner Companies Social Work

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2012

Transaction ID : SA11AI.61703

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Edward Shaffer

Mailing Address 300 Sourwood Court

City State Zip Code
Millersville MD 21108

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

Name of Employer Occupation
Not Employed (Retired)

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 09 / 2012

Transaction ID : SA11AI.61656

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Patricia Shaffer

Mailing Address 300 Sourwood Court

City State Zip Code
Millersville MD 21108

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 09 / 2012

Transaction ID : SA11AI.61658

Amount of Each Receipt this Period
250.00

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

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

1350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Joyce Smith

Mailing Address PO Box 64035

City Tuscon State AZ Zip Code 85728

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

Name of Employer Retired Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **320.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2012

Transaction ID : SA11AI.61240

Amount of Each Receipt this Period
20.00

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

Mailing Address PO Box 64035

City Tuscon State AZ Zip Code 85728

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

Name of Employer Retired Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **340.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 03 / 2012

Transaction ID : SA11AI.61483

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
Joyce Smith

Mailing Address PO Box 64035

City Tuscon State AZ Zip Code 85728

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

Name of Employer Retired Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **360.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 03 / 2012

Transaction ID : SA11AI.61566

Amount of Each Receipt this Period
20.00

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

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

60.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. John Sullivan		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 13 / 2012	
Mailing Address 3022 Crest Avenue		Transaction ID : SA11AI.61668	
City Cheverly	State MD	Zip Code 20785	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Buyer's Edge Co., Inc.	Occupation Real Estate Broker		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 841.91		

Full Name (Last, First, Middle Initial) B. Stojan Trajkov		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 31 / 2012	
Mailing Address 18015 Golden Spring Court		Transaction ID : SA11AI.61675	
City Olney	State MD	Zip Code 20832	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Self Employed	Occupation System Engineer		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) C. Roxanne Warren		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 05 / 2012	
Mailing Address 523 West 112th Street		Transaction ID : SA11AI.61297	
City New York	State NY	Zip Code 10025	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer Self Employed	Occupation Architect		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 325.00		

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Wendy Wendlandt

Mailing Address 1512 Harvard Street
#1

City Santa Monica State CA Zip Code 90404

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

Name of Employer Fund for the Public Interest Occupation Political Organizer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
280.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 23 / 2012

Transaction ID : SA11AI.61450

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Wendy Wendlandt

Mailing Address 1512 Harvard Street
#1

City Santa Monica State CA Zip Code 90404

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

Name of Employer Fund for the Public Interest Occupation Political Organizer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 23 / 2012

Transaction ID : SA11AI.61534

Amount of Each Receipt this Period
20.00

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

Mailing Address 750 Springbloom Drive

City Millersville State MD Zip Code 21108

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

Name of Employer Law Offices of Peter Angelos Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 13 / 2012

Transaction ID : SA11AI.61684

Amount of Each Receipt this Period
500.00

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

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

540.00

17450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 55
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AFL-CIO COPE POLITICAL CONTRIBUTIONS COMMITTEE

Mailing Address 815 16th Street NW

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00003806

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2012

Transaction ID : SA11C.61105

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
AIRCRAFT OWNERS AND PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 421 Aviation Way

City Frederick State MD Zip Code 21701

FEC ID number of contributing federal political committee. **C** C00131185

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 01 / 2012

Transaction ID : SA11C.61089

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 25 MASSACHUSETTS AVENUE NW
SUITE 600

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00000422

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2012

Transaction ID : SA11C.61095

Amount of Each Receipt this Period
 1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 55
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial)
CARPENTERS LEGISLATIVE IMPROVEMENT COMMITTEE UNITED BROTHERHOOD OF CARPENTERS AND JOINERS

A. Mailing Address 101 Constitution Ave NW
Tenth Floor West

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00001016

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 01 / 2012

Transaction ID : SA11C.61092

Amount of Each Receipt this Period
 5000.00

B. Full Name (Last, First, Middle Initial)
DEMOCRACY FOR AMERICA

Mailing Address PO Box 8313
SUITE 300

City Burlington State VT Zip Code 05402

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 04 / 2012

Transaction ID : SA11C.61084

Amount of Each Receipt this Period
 5000.00

C. Full Name (Last, First, Middle Initial)
DEMOCRACY FOR AMERICA

Mailing Address PO Box 8313
SUITE 300

City Burlington State VT Zip Code 05402

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 04 / 2012

Transaction ID : SA11C.61085

Amount of Each Receipt this Period
 5000.00

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 55
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial)
ENGINEERS POLITICAL EDUCATION COMMITTEE (EPEC)/INTERNATIONAL UNION OF OPERATING ENGINEERS

A. Mailing Address 1125 17th St, NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00029504

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2012

Transaction ID : SA11C.61094

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
NARAL PRO-CHOICE AMERICA PAC

B. Mailing Address 1156 15th Street NW Suite 700

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00079541

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 23 / 2012

Transaction ID : SA11C.61087

Amount of Each Receipt this Period
2000.00

Full Name (Last, First, Middle Initial)
NATIONAL WEATHER SERVICE EMPLOYEES ORGANIZATION POLITICAL ACTION COMMITTEE

C. Mailing Address 601 PENNSYLVANIA AVE NW SUITE 900

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00318311

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 13 / 2012

Transaction ID : SA11C.61091

Amount of Each Receipt this Period
250.00

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

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

4750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 55
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RAYTHEON COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1100 Wilson Blvd
Suite 1500

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 25 / 2012

Transaction ID : SA11C.61088

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
SERVICE EMPLOYEES INTERNATIONAL UNION COMMITTEE ON POLITICAL EDUCATION (SEIU COPE)

Mailing Address 1800 Massachusetts Ave NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00004036

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 20 / 2012

Transaction ID : SA11C.61086

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
TRUEBLUE, INC. POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 2910

City TACOMA State WA Zip Code 98401

FEC ID number of contributing federal political committee. **C** C00363853

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 27 / 2012

Transaction ID : SA11C.61107

Amount of Each Receipt this Period
1000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 55
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Mailing Address 8000 EAST JEFFERSON

City	State	Zip Code
DETROIT	MI	48214

FEC ID number of contributing federal political committee. **C C00002840**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	01	/	2012

Transaction ID : SA11C.61093

Amount of Each Receipt this Period
 _____ 1000.00

Full Name (Last, First, Middle Initial)
B. UNITED STEELWORKERS POLITICAL ACTION FUND

Mailing Address Five Gateway Center

City	State	Zip Code
Pittsburgh	PA	15222

FEC ID number of contributing federal political committee. **C C00003590**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	11	/	2012

Transaction ID : SA11C.61090

Amount of Each Receipt this Period
 _____ 5000.00

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

Mailing Address 1101 PENNSYLVANIA AVE, NW
10TH FLOOR

City	State	Zip Code
WASHINGTON	DC	20004

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	01	/	2012

Transaction ID : SA11C.61111

Amount of Each Receipt this Period
 _____ 1000.00

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

_____ 7000.00

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

_____ 38250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 55			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2012
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 45.73 Transaction ID : SB17.61004
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Fund Raising Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2012
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 66.62 Transaction ID : SB17.61005
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Fund Raising Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2012
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 22.32 Transaction ID : SB17.61006
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Fund Raising Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	134.67
TOTAL This Period (last page this line number only).....	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 55			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2012	
Mailing Address 14 Arrow Street			Amount of Each Disbursement this Period 10.24	
City Cambridge	State MA	Zip Code 02138	Transaction ID : SB17.61007	
Purpose of Disbursement Fund Raising Fees		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2012	
Mailing Address 14 Arrow Street			Amount of Each Disbursement this Period 2.98	
City Cambridge	State MA	Zip Code 02138	Transaction ID : SB17.61008	
Purpose of Disbursement Fund Raising Fees		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2012	
Mailing Address 14 Arrow Street			Amount of Each Disbursement this Period 37.22	
City Cambridge	State MA	Zip Code 02138	Transaction ID : SB17.61009	
Purpose of Disbursement Fund Raising Fees		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	50.44
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 55	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2012
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 6.25 Transaction ID : SB17.61010
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Fund Raising Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2012
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 2.18 Transaction ID : SB17.61080
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Fund Raising Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2012
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 12.61 Transaction ID : SB17.61011
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Fund Raising Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	21.04
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 55	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2012
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 128.13 Transaction ID : SB17.61012
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Fund Raising Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2012
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 4.02 Transaction ID : SB17.61013
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Fund Raising Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. BB&T Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2012
Mailing Address P.O. Box 200		Amount of Each Disbursement this Period 7.95 Transaction ID : SB17.61014
City Wilson	State NC	
Zip Code 27894-0200	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	140.10
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 55			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BB&T Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2012
Mailing Address P.O. Box 200		Amount of Each Disbursement this Period 7.95
City Wilson	State NC	
Zip Code 27894-0200	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : SB17.61017
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. BB&T Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2012
Mailing Address P.O. Box 200		Amount of Each Disbursement this Period 37.45
City Wilson	State NC	
Zip Code 27894-0200	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : SB17.61023
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. BB&T Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2012
Mailing Address P.O. Box 200		Amount of Each Disbursement this Period 1.00
City Wilson	State NC	
Zip Code 27894-0200	Purpose of Disbursement Bank Fees	Transaction ID : SB17.61001
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	46.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 55	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BB&T Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2012
Mailing Address P.O. Box 200		Amount of Each Disbursement this Period 25.95 Transaction ID : SB17.61078
City Wilson	State NC	
Zip Code 27894-0200	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. BB&T Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2012
Mailing Address P.O. Box 200		Amount of Each Disbursement this Period 18.00 Transaction ID : SB17.61026
City Wilson	State NC	
Zip Code 27894-0200	Purpose of Disbursement Bank Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. BB&T Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2012
Mailing Address P.O. Box 200		Amount of Each Disbursement this Period 37.45 Transaction ID : SB17.61024
City Wilson	State NC	
Zip Code 27894-0200	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	81.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 55	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BB&T Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2012
Mailing Address P.O. Box 200		Amount of Each Disbursement this Period 7.95 Transaction ID : SB17.61015
City Wilson	State NC	
Zip Code 27894-0200	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. BB&T Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2012
Mailing Address P.O. Box 200		Amount of Each Disbursement this Period 7.95 Transaction ID : SB17.61018
City Wilson	State NC	
Zip Code 27894-0200	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. BB&T Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2012
Mailing Address P.O. Box 200		Amount of Each Disbursement this Period 47.85 Transaction ID : SB17.61079
City Wilson	State NC	
Zip Code 27894-0200	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	63.75
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 55	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BB&T Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2012
Mailing Address P.O. Box 200		Amount of Each Disbursement this Period 37.45 Transaction ID : SB17.61025
City Wilson	State NC	
Zip Code 27894-0200	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. BB&T Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address P.O. Box 200		Amount of Each Disbursement this Period 7.95 Transaction ID : SB17.61016
City Wilson	State NC	
Zip Code 27894-0200	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. BB&T Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address P.O. Box 200		Amount of Each Disbursement this Period 7.95 Transaction ID : SB17.61019
City Wilson	State NC	
Zip Code 27894-0200	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	53.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 55	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Best Buy		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2012
Mailing Address 7601 Penn Avenue South		Amount of Each Disbursement this Period 3684.12
City Richfield	State MN	
Zip Code 55423	Purpose of Disbursement Laptops & Software	Transaction ID : SB17.60997
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Bond 45		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2012
Mailing Address 149 Waterfront Street		Amount of Each Disbursement this Period 174.67
City National Harbor	State MD	
Zip Code 20745	Purpose of Disbursement Catering Services - Fund Raising Event	Transaction ID : SB17.61032
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Bond 45		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2012
Mailing Address 149 Waterfront Street		Amount of Each Disbursement this Period 238.01
City National Harbor	State MD	
Zip Code 20745	Purpose of Disbursement Catering Services - Fund Raising Event	Transaction ID : SB17.61031
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4096.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 55			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Carey International, Inc.		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2012
Mailing Address 4530 Wisconsin Avenue NW		Amount of Each Disbursement this Period 149.76 Transaction ID : SB17.61035
City Washington State DC Zip Code 20016	Purpose of Disbursement Car Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Carey International, Inc.		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2012
Mailing Address 4530 Wisconsin Avenue NW		Amount of Each Disbursement this Period 151.70 Transaction ID : SB17.61036
City Washington State DC Zip Code 20016	Purpose of Disbursement Car Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Carey International, Inc.		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2012
Mailing Address 4530 Wisconsin Avenue NW		Amount of Each Disbursement this Period 149.76 Transaction ID : SB17.61037
City Washington State DC Zip Code 20016	Purpose of Disbursement Car Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	451.22
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 55	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Adrienne Christian		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2012
Mailing Address 511 Four Mile Road		Amount of Each Disbursement this Period 10000.00 Transaction ID : SB17.60985
City Alexandria	State VA	
Zip Code 22305	Purpose of Disbursement Consulting Services - Campaign Mgmt	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Constant Contact		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2012
Mailing Address 1601 Trapelo Road Suite 329		Amount of Each Disbursement this Period 75.00 Transaction ID : SB17.61020
City Waltham	State MA	
Zip Code 02451	Purpose of Disbursement Email Marketing and Survey Tools	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Constant Contact		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2012
Mailing Address 1601 Trapelo Road Suite 329		Amount of Each Disbursement this Period 75.00 Transaction ID : SB17.61021
City Waltham	State MA	
Zip Code 02451	Purpose of Disbursement Email Marketing and Survey Tools	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	10150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 55	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Constant Contact		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2012
Mailing Address 1601 Trapelo Road Suite 329		Amount of Each Disbursement this Period 75.00
City Waltham	State MA Zip Code 02451	
Purpose of Disbursement Email Marketing and Survey Tools	Category/Type	Transaction ID : SB17.61022
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Crane & Co.		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2012
Mailing Address 30 South Street		Amount of Each Disbursement this Period 379.95
City Dalton	State MA Zip Code 01226	
Purpose of Disbursement Stationary	Category/Type	Transaction ID : SB17.61068
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Extra Space Storage		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2012
Mailing Address 9211 Livingston Road		Amount of Each Disbursement this Period 211.00
City Fort Washington	State MD Zip Code 20744	
Purpose of Disbursement Storage	Category/Type	Transaction ID : SB17.61002
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	665.95
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 55	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Extra Space Storage		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2012
Mailing Address 9211 Livingston Road		Amount of Each Disbursement this Period 211.00
City Fort Washington	State MD	
Zip Code 20744	Purpose of Disbursement Storage	Transaction ID : SB17.61003
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. GRD Consulting LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address 12138 Central Avenue Suite 283		Amount of Each Disbursement this Period 2125.00
City Mitchellville	State MD	
Zip Code 20721	Purpose of Disbursement Consulting Services - Redistricting	Transaction ID : SB17.60990
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Hyatt Regency Chesapeake Bay		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address 100 Heron Blvd.		Amount of Each Disbursement this Period 1299.00
City Cambridge	State MD	
Zip Code 21613	Purpose of Disbursement Travel - Lodging	Transaction ID : SB17.61042
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3635.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 55			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JSTREETPAC		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2012
Mailing Address PO BOX 33106		Amount of Each Disbursement this Period 30.25 Transaction ID : SB17.60979
City WASHINGTON	State DC	
Zip Code 20033	Purpose of Disbursement Fund Raising Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. JSTREETPAC		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2012
Mailing Address PO BOX 33106		Amount of Each Disbursement this Period 13.75 Transaction ID : SB17.60980
City WASHINGTON	State DC	
Zip Code 20033	Purpose of Disbursement Fund Raising Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Maryland State and District of Columbia AFL-CIO		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2012
Mailing Address PO Box 26428		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.61000
City Baltimore	State MD	
Zip Code 21027	Purpose of Disbursement Event Sponsorship	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2044.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 55	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mid-Atlantic Real Estate Investments		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address 9161 Liberia Avenue Suite 207		Amount of Each Disbursement this Period 1175.18 Transaction ID : SB17.60981
City Manassas State VA Zip Code 20110	Purpose of Disbursement Office Rent	
Candidate Name	Category/Type	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Mid-Atlantic Real Estate Investments		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2012
Mailing Address 9161 Liberia Avenue Suite 207		Amount of Each Disbursement this Period 1175.18 Transaction ID : SB17.60982
City Manassas State VA Zip Code 20110	Purpose of Disbursement Office Rent	
Candidate Name	Category/Type	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Cheryl & Michael Miller		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2012
Mailing Address 2698 Willow Hill Road		Amount of Each Disbursement this Period 2200.00 Transaction ID : SB17.60995
City Annapolis State MD Zip Code 21403	Purpose of Disbursement Office Rent	
Candidate Name	Category/Type	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4550.36
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 55			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2012
Mailing Address 30 Ivy Street SE		Amount of Each Disbursement this Period 103.63 Transaction ID : SB17.61047
City Washington State DC Zip Code 20003	Purpose of Disbursement Meals	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2012
Mailing Address 30 Ivy Street SE		Amount of Each Disbursement this Period 604.10 Transaction ID : SB17.60998
City Washington State DC Zip Code 20003	Purpose of Disbursement Food & Beverage - Fundraiser	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. NGP Software, Inc.		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2012
Mailing Address 1225 Eye Street, NW		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.61048
City Washington State DC Zip Code 20005	Purpose of Disbursement Fund Raising Software	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2207.73
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 55	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jeremiah Pope		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2012
Mailing Address 10503 Sweetbriar Parkway		Amount of Each Disbursement this Period 14048.68 Transaction ID : SB17.60984
City State Zip Code Silver Spring MD 20903	Purpose of Disbursement Consulting Services - Fund raising	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Jeremiah Pope		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2012
Mailing Address 10503 Sweetbriar Parkway		Amount of Each Disbursement this Period 7000.00 Transaction ID : SB17.60991
City State Zip Code Silver Spring MD 20903	Purpose of Disbursement Consulting Services - Fund Raising	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Jeremiah Pope		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2012
Mailing Address 10503 Sweetbriar Parkway		Amount of Each Disbursement this Period 7000.00 Transaction ID : SB17.60999
City State Zip Code Silver Spring MD 20903	Purpose of Disbursement Consulting Services - Fund Raising	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	28048.68
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 55	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Shell		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2012
Mailing Address 8511 Oxon Hill Road		Amount of Each Disbursement this Period 47.70
City Fort Washington	State MD	
Zip Code 20744	Purpose of Disbursement Gas	Transaction ID : SB17.61058
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Shell		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2012
Mailing Address 8511 Oxon Hill Road		Amount of Each Disbursement this Period 38.05
City Fort Washington	State MD	
Zip Code 20744	Purpose of Disbursement Gas	Transaction ID : SB17.61059
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Shell		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address 8511 Oxon Hill Road		Amount of Each Disbursement this Period 44.78
City Fort Washington	State MD	
Zip Code 20744	Purpose of Disbursement Gas	Transaction ID : SB17.61060
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	130.53
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 55	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Shell		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address 8511 Oxon Hill Road		Amount of Each Disbursement this Period 55.26 Transaction ID : SB17.61061
City Fort Washington	State MD	
Zip Code 20744	Purpose of Disbursement Gas	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Shell		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2012
Mailing Address 8511 Oxon Hill Road		Amount of Each Disbursement this Period 56.11 Transaction ID : SB17.61062
City Fort Washington	State MD	
Zip Code 20744	Purpose of Disbursement Gas	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Shell		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012
Mailing Address 8511 Oxon Hill Road		Amount of Each Disbursement this Period 50.62 Transaction ID : SB17.61063
City Fort Washington	State MD	
Zip Code 20744	Purpose of Disbursement Gas	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	161.99
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 55			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SyDar of DC LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2012
Mailing Address 2828 10th Street NE Suite 2		Amount of Each Disbursement this Period 312.70 Transaction ID : SB17.61064
City Washington State DC Zip Code 20017	Purpose of Disbursement Print Services - Mailer	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. SyDar of DC LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2012
Mailing Address 2828 10th Street NE Suite 2		Amount of Each Disbursement this Period 1482.00 Transaction ID : SB17.61065
City Washington State DC Zip Code 20017	Purpose of Disbursement Print Services - Mailer	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. SyDar of DC LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2012
Mailing Address 2828 10th Street NE Suite 2		Amount of Each Disbursement this Period 5030.76 Transaction ID : SB17.61066
City Washington State DC Zip Code 20017	Purpose of Disbursement Print Services - Mailer	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6825.46
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 55	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address 77 West Wacker Drive		Amount of Each Disbursement this Period 427.60 Transaction ID : SB17.61069
City Chicago State IL Zip Code 60601	Purpose of Disbursement Travel - Airfare	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. US Airways		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2012
Mailing Address 4000 E. Sky Harbor Blvd		Amount of Each Disbursement this Period 669.60 Transaction ID : SB17.61070
City Phoenix State AZ Zip Code 85043	Purpose of Disbursement Travel - Airfare	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. US Airways		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2012
Mailing Address 4000 E. Sky Harbor Blvd		Amount of Each Disbursement this Period 75.00 Transaction ID : SB17.61071
City Phoenix State AZ Zip Code 85043	Purpose of Disbursement Travel - Baggage Handling Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1172.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 55	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US Airways		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012
Mailing Address 4000 E. Sky Harbor Blvd		Amount of Each Disbursement this Period 25.00
City Phoenix	State AZ Zip Code 85043	
Purpose of Disbursement Travel - Baggage Handling Fee		Transaction ID : SB17.61072
Candidate Name		
Office Sought:	Disbursement For: 2012	Category/Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. US Airways		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012
Mailing Address 4000 E. Sky Harbor Blvd		Amount of Each Disbursement this Period 835.60
City Phoenix	State AZ Zip Code 85043	
Purpose of Disbursement Travel - Airfare		Transaction ID : SB17.61073
Candidate Name		
Office Sought:	Disbursement For: 2012	Category/Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) c. US Airways		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2012
Mailing Address 4000 E. Sky Harbor Blvd		Amount of Each Disbursement this Period 801.80
City Phoenix	State AZ Zip Code 85043	
Purpose of Disbursement Travel - Airfare		Transaction ID : SB17.61074
Candidate Name		
Office Sought:	Disbursement For: 2012	Category/Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	1662.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 55			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Verizon		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2012
Mailing Address PO Box 17577		Amount of Each Disbursement this Period 350.95 Transaction ID : SB17.60986
City Baltimore	State MD	
Zip Code 21297	Purpose of Disbursement Phones	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Verizon		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012
Mailing Address PO Box 17577		Amount of Each Disbursement this Period 247.28 Transaction ID : SB17.60993
City Baltimore	State MD	
Zip Code 21297	Purpose of Disbursement Phones	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Daniel Weber		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2012
Mailing Address 1356 Kenyon St. NW, #2		Amount of Each Disbursement this Period 5148.00 Transaction ID : SB17.60983
City Washington	State DC	
Zip Code 20010	Purpose of Disbursement Consulting Services - Communications	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	5746.23
TOTAL This Period (last page this line number only).....	72139.70

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 55	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BERA FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2012
Mailing Address POST OFFICE BOX 582496		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB18.60942
City ELK GROVE State CA Zip Code 95758	Purpose of Disbursement Campaign Contribution	
Candidate Name AMERISH BERA	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 07		

Full Name (Last, First, Middle Initial) B. BOOCKVAR FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address 73 OLD DUBLIN PIKE SUITE 10 #134		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB18.60962
City DOYLESTOWN State PA Zip Code 18901	Purpose of Disbursement Campaign Contribution	
Candidate Name KATHRYN BOOCKVAR	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: PA District: 08		

Full Name (Last, First, Middle Initial) C. CHRISTIE VILSACK FOR IOWA		Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2012
Mailing Address PO BOX 641		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB18.60955
City AMES State IA Zip Code 50010	Purpose of Disbursement Campaign Contribution	
Candidate Name CHRISTIE VILSACK	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IA District: 04		

SUBTOTAL of Disbursements This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 55	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

A. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 430 South Capitol Street, SE
2nd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement Membership Dues

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 08 / 2012

Amount of Each Disbursement this Period: 20000.00

Transaction ID : SB18.60969

B. DENNY HECK FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 235

City OLYMPIA State WA Zip Code 98507

Purpose of Disbursement Campaign Contribution

Candidate Name DENNIS HECK

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: WA District: 10

Date of Disbursement: 02 / 08 / 2012

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB18.60964

C. FRIENDS OF CHARLIE WILSON

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 334

City BRIDGEPORT State OH Zip Code 43912

Purpose of Disbursement Campaign Contribution

Candidate Name CHARLES A WILSON

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: OH District: 06

Date of Disbursement: 01 / 30 / 2012

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB18.60961

SUBTOTAL of Disbursements This Page (optional)..... 22000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 55	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRIENDS OF DAN MAFFEI		Date of Disbursement MM / DD / YYYY 02 / 06 / 2012
Mailing Address PO BOX 230		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB18.60960
City SYRACUSE	State NY	
Zip Code 13201	Purpose of Disbursement Campaign Contribution	Category/ Type
Candidate Name DANIEL BENJAMIN MR. MAFFEI	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 25	

Full Name (Last, First, Middle Initial) B. HANSEN CLARKE FOR CONGRESS		Date of Disbursement MM / DD / YYYY 01 / 31 / 2012
Mailing Address 1448 WOODWARD AVENUE #305		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB18.60968
City DETROIT	State MI	
Zip Code 48226	Purpose of Disbursement Campaign Contribution	Category/ Type
Candidate Name HANSEN CLARKE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 13	

Full Name (Last, First, Middle Initial) C. HIRSCHBIEL FOR CONGRESS		Date of Disbursement MM / DD / YYYY 01 / 30 / 2012
Mailing Address PO BOX 8728		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB18.60967
City VIRGINIA BEACH	State VA	
Zip Code 23450	Purpose of Disbursement Campaign Contribution	Category/ Type
Candidate Name PAUL ODELL JR HIRSCHBIEL	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: VA	District: 02	

SUBTOTAL of Disbursements This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 55	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JESSE JACKSON JR FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address P.O. BOX 490286		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB18.60940
City CHICAGO	State IL	
Zip Code 60649	Purpose of Disbursement Campaign Contribution	Category/ Type
Candidate Name JESSE JR JACKSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IL District: 02	

Full Name (Last, First, Middle Initial) B. JOSE HERNANDEZ FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2012
Mailing Address PO BOX 1667		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB18.60943
City MODESTO	State CA	
Zip Code 95353	Purpose of Disbursement Campaign Contribution	Category/ Type
Candidate Name JOSE M HERNANDEZ	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 10	

Full Name (Last, First, Middle Initial) C. KEITH FITZGERALD FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address PO BOX 3708		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB18.60954
City SARASOTA	State FL	
Zip Code 34230	Purpose of Disbursement Campaign Contribution	Category/ Type
Candidate Name KEITH FITZGERALD	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 13	

SUBTOTAL of Disbursements This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 55	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KUSTER FOR CONGRESS, INC.		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2012
Mailing Address P.O. BOX 1498		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB18.60958
City CONCORD	State NH	
Zip Code 03302	Purpose of Disbursement Campaign Contribution	Category/ Type
Candidate Name ANN MCLANE KUSTER	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NH	District: 02	

Full Name (Last, First, Middle Initial) B. MARK TAKANO FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2012
Mailing Address 728 W EDNA PLACE		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB18.60945
City COVINA	State CA	
Zip Code 91722	Purpose of Disbursement Campaign Contribution	Category/ Type
Candidate Name MARK TAKANO	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA	District: 41	

Full Name (Last, First, Middle Initial) C. MIKE THOMPSON FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address 5429 MADISON AVENUE		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB18.60963
City SACRAMENTO	State CA	
Zip Code 95841	Purpose of Disbursement Campaign Contribution	Category/ Type
Candidate Name MIKE MR. THOMPSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA	District: 05	

SUBTOTAL of Disbursements This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 55	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MULLEN FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2012
Mailing Address PO BOX 11665		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB18.60956
City SOUTH BEND State IN Zip Code 46634	Purpose of Disbursement Campaign Contribution	
Candidate Name BRENDAN B. MULLEN	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN District: 02		

Full Name (Last, First, Middle Initial) B. OCEGUERA FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2012
Mailing Address 3259 E WARM SPRINGS		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB18.60959
City LAS VEGAS State NV Zip Code 89120	Purpose of Disbursement Campaign Contribution	
Candidate Name JOHN OCEGUERA	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NV District: 03		

Full Name (Last, First, Middle Initial) C. PAM GULLESON FOR NORTH DAKOTA		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2012
Mailing Address PO BOX 6517		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB18.60957
City FARGO State ND Zip Code 58109	Purpose of Disbursement Campaign Contribution	
Candidate Name PAM GULLESON	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: ND District: 00		

SUBTOTAL of Disbursements This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 55	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. RICHARDSON FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2012
Mailing Address 110 PINE AVE., #1010		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB18.60941
City LONG BEACH	State CA	
Zip Code 90802	Purpose of Disbursement Campaign Contribution	Category/ Type
Candidate Name LAURA RICHARDSON	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 44	

Full Name (Last, First, Middle Initial) B. SAL PACE FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2012
Mailing Address PO BOX 1510		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB18.60948
City PUEBLO	State CO	
Zip Code 81002	Purpose of Disbursement Campaign Contribution	Category/ Type
Candidate Name SALVATORE II PACE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CO District: 03	

Full Name (Last, First, Middle Initial) C. VAL DEMINGS FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address P.O. BOX 536926		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB18.60949
City ORLANDO	State FL	
Zip Code 32853	Purpose of Disbursement Campaign Contribution	Category/ Type
Candidate Name VALDEZ VAL DEMINGS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 08	

SUBTOTAL of Disbursements This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 55	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DONNA EDWARDS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WALL FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2012
Mailing Address P.O. BOX 1145		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB18.60966
City GREEN BAY State WI Zip Code 54305	Purpose of Disbursement Campaign Contribution	
Candidate Name JAMES R WALL	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WI District: 08		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
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)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
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)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	41000.00

SCHEDULE D (FEC Form 3)

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)

DONNA EDWARDS FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Estelle Rogers

Mailing Address 3252 S Street NW

City State Zip Code
Washington DC 20007

Nature of Debt (Purpose):
Legal Services

Outstanding Balance Beginning This Period **Transaction ID : SD10.37255**
10020.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 10020.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	▶	10020.00
2) TOTALS This Period (last page this line number only)	▶	10020.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶		10020.00