

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

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

M M / D D / Y Y Y Y

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

M M / D D / Y Y Y Y

5. Covering Period

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

through

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

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

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

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

Office Use Only									
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FEC FORM 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))....	61562.52	656398.78
(b) Total Contribution Refunds (from Line 20(d))	0.00	35.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	61562.52	656363.78
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	107044.02	523034.62
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1766.50
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	107044.02	521268.12
8. Cash on Hand at Close of Reporting Period (from Line 27).....	135455.54	
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).....	6370.00	230672.03
(ii) Unitemized.....	2442.52	73228.75
(iii) TOTAL of contributions from individuals ▶	8812.52	303900.78
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	52750.00	352498.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	61562.52	656398.78
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.)	0.00	1766.50
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)..... ▶	61562.52	663165.28

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	107044.02	523034.62
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	9000.00	50000.00
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	0.00	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)).....	0.00	35.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	116044.02	573069.62

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	189937.04
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	61562.52
25. SUBTOTAL (add Line 23 and Line 24).....	251499.56
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	116044.02
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	135455.54

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

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

FOR LINE NUMBER: PAGE 5 OF 70
(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)
Syed Ali

Mailing Address 12504 Degas Court

City Gaithersburg State MD Zip Code 20878

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

Name of Employer Self Occupation Psychiatrist

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
 04 / 01 / 2012

Transaction ID : SA11AI.62135

Amount of Each Receipt this Period
 _____ 100.00

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

Mailing Address 4629 30th Street, NW

City Washington State DC Zip Code 20008

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

Name of Employer Celebrity Service Occupation Self Employed

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
 04 / 01 / 2012

Transaction ID : SA11AI.62138

Amount of Each Receipt this Period
 _____ 1000.00

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
 _____ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 03 / 2012

Transaction ID : SA11AI.61991

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 6 OF 70
	<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)
David Forman

Mailing Address 5344 Falmouth Road

City: Bethesda State: MD Zip Code: 20816

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

Name of Employer: Finnegan Occupation: Patent Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 1050.00

Date of Receipt: 05 / 20 / 2012

Transaction ID : SA11AI.62068

Amount of Each Receipt this Period: 200.00

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

Mailing Address 5344 Falmouth Road

City: Bethesda State: MD Zip Code: 20816

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

Name of Employer: Finnegan Occupation: Patent Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 1075.00

Date of Receipt: 06 / 27 / 2012

Transaction ID : SA11AI.62127

Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial)
Naomi Franklin

Mailing Address 1411 Utah Street #4

City: Salt Lake City State: UT Zip Code: 84104

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: 400.00

Date of Receipt: 04 / 01 / 2012

Transaction ID : SA11AI.62170

Amount of Each Receipt this Period: 400.00

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

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

625.00

**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 70
	<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
 _____ 575.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : SA11AI.62025

Amount of Each Receipt this Period
 _____ 25.00

B. 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
 _____ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2012

Transaction ID : SA11AI.62074

Amount of Each Receipt this Period
 _____ 25.00

C. 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
 _____ 625.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2012

Transaction ID : SA11AI.62103

Amount of Each Receipt this Period
 _____ 25.00

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

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

_____ 75.00

**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 8 OF 70
	<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)
Kamal Ghaffarian

Mailing Address 4205 Buckskin Lake Drive

City Ellicott City State MD Zip Code 21042

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

Name of Employer SGT, Inc. Occupation President & CEO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 10 / 2012

Transaction ID : SA11AI.62015

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Darnell Ingram

Mailing Address 12001 Old Columbia Pike #203

City Silver Spring State MD Zip Code 20904

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

Name of Employer WUNU Construction Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2012

Transaction ID : SA11AI.62146

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Harry Letaw

Mailing Address 440 Severnside Drive

City Severna Park State MD Zip Code 21146

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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2012

Transaction ID : SA11AI.62124

Amount of Each Receipt this Period
 100.00

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

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

1600.00

**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 70
	<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)
Laurance Rockefeller

Mailing Address 30 Rockefeller Plaza
Room 5600

City New York State NY Zip Code 10011

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

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
 04 / 16 / 2012

Transaction ID : SA11AI.62161

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Patricia Salomon

Mailing Address PO Box 313

City Monterey State MA Zip Code 01245

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

Name of Employer Occupation
Retired Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 08 / 2012

Transaction ID : SA11AI.62111

Amount of Each Receipt this Period
 250.00

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

Mailing Address 300 Sourwood Court

City Millersville State MD Zip Code 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

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2012

Transaction ID : SA11AI.62134

Amount of Each Receipt this Period
 100.00

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 10 OF 70
	<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. Joyce Smith		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 03 / 2012
Mailing Address PO Box 64035		Transaction ID : SA11AI.61987
City Tuscon	State AZ	Zip Code 85728
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00	
Name of Employer Retired	Occupation	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 380.00	

Full Name (Last, First, Middle Initial) B. Joyce Smith		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 03 / 2012
Mailing Address PO Box 64035		Transaction ID : SA11AI.62041
City Tuscon	State AZ	Zip Code 85728
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00	
Name of Employer Retired	Occupation	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) C. Joyce Smith		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 03 / 2012
Mailing Address PO Box 64035		Transaction ID : SA11AI.62091
City Tuscon	State AZ	Zip Code 85728
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00	
Name of Employer Retired	Occupation	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 420.00	

SUBTOTAL of Receipts This Page (optional).....	60.00
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 11 OF 70
	<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)
Venkat Subramanian

Mailing Address 7302 Goddard Drive

City Lanham State MD Zip Code 20706

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

Name of Employer **ANGARAI** Occupation **President & CEO**

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
06 / 05 / 2012

Transaction ID : SA11AI.62107

Amount of Each Receipt this Period
250.00

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 **340.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 23 / 2012

Transaction ID : SA11AI.62021

Amount of Each Receipt this Period
20.00

C. 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 **360.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 23 / 2012

Transaction ID : SA11AI.62070

Amount of Each Receipt this Period
20.00

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

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

290.00

**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 12 OF 70
	<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
380.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2012

Transaction ID : SA11AI.62123

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Carol Winograd

Mailing Address 746 Esplanada Way

City Stanford State CA Zip Code 94305

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

Name of Employer Stanford University Occupation Professor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 27 / 2012

Transaction ID : SA11AI.62168

Amount of Each Receipt this Period
1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1020.00

6370.00

**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 70
	<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)
AMERICAN FEDERATION OF STATE, COUNTY AND MUNICIPAL EMPLOYEES, AFL-CIO

Mailing Address 1625 L STREET NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C3000798

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 24 / 2012

Transaction ID : SA11C.61969

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
AMERICAN HOSPITAL ASSOCIATION PAC

Mailing Address 325 Seventh Street NW
Suite 700

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00106146

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 Y
 04 / 01 / 2012

Transaction ID : SA11C.61928

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
ARENT FOX LLP PAC (AFPAC)

Mailing Address ARENT FOX LLP
1050 CONNECTICUT AVENUE, NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00241380

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
 05 / 29 / 2012

Transaction ID : SA11C.61946

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 14 OF 70
	<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)
ASSOCIATION OF AMERICAN RAILROADS POLITICAL ACTION COMMITTEE (RAILPAC)

Mailing Address 425 3RD STREET, S..W.
SUITE 1000

City WASHINGTON State DC Zip Code 20024

FEC ID number of contributing federal political committee. **C** C00280743

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
 05 / 16 / 2012

Transaction ID : SA11C.52740

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
BAKERY, CONFECTIONERY, TOBACCO WORKERS AND GRAIN MILLERS INTERNATIONAL UNION PAC

Mailing Address 10401 Connecticut Avenue

City Kensington State MD Zip Code 20895

FEC ID number of contributing federal political committee. **C** C00127621

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 Y
 04 / 19 / 2012

Transaction ID : SA11C.61976

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
BALL CORPORATION POLITICAL ACTION COMMITTEE (BALLPAC)

Mailing Address 10 Longs Peak Drive

City Broomfield State CO Zip Code 80021

FEC ID number of contributing federal political committee. **C** C00039461

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 Y
 04 / 01 / 2012

Transaction ID : SA11C.61927

Amount of Each Receipt this Period
1000.00

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

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

3000.00

**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 70
	<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)
BNSF RAILWAY COMPANY RAILPAC (BNSF RAILPAC)

Mailing Address P.O. BOX 961039

City State Zip Code
FORT WORTH TX 76161

FEC ID number of contributing federal political committee. **C C00235739**

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
06 / 14 / 2012

Transaction ID : SA11C.61973

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
BOILERMAKERS BLACKSMITHS FORGERS AND HELPERS OF AMERICA LOCAL 169 BOILERMAKERS PAC

Mailing Address 1755 FAIRLANE DRIVE

City State Zip Code
FAIRLANE MI 48101

FEC ID number of contributing federal political committee. **C C00040949**

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
06 / 07 / 2012

Transaction ID : SA11C.61963

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
BRICKLAYERS AND ALLIED CRAFTWORKERS LOCAL NO 3 BUFFALO CHAPTER PAC

Mailing Address 3750 Monroe Avenue
Suite 17A

City State Zip Code
Pittsford NY 14534

FEC ID number of contributing federal political committee. **C C00373423**

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
04 / 02 / 2012

Transaction ID : SA11C.61933

Amount of Each Receipt this Period
5000.00

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

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

8500.00

**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 70
	<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)
BRICKLAYERS AND ALLIED CRAFTWORKERS LOCAL NO 3 BUFFALO CHAPTER PAC

Mailing Address 3750 Monroe Avenue
Suite 17A

City State Zip Code
Pittsford NY 14534

FEC ID number of contributing federal political committee. **C C00373423**

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
04 / 24 / 2012

Transaction ID : SA11C.61937

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
CHICKASAW NATION

Mailing Address 520 E. ARLINGTON

City State Zip Code
ADA OK 74820

FEC ID number of contributing federal political committee. **C C90007923**

Name of Employer Occupation

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
04 / 01 / 2012

Transaction ID : SA11C.61954

Amount of Each Receipt this Period
1250.00

C. Full Name (Last, First, Middle Initial)
CSX CORPORATION GOOD GOVERNMENT FUND

Mailing Address 1331 Pennsylvania Ave, NW, Ste 560
Suite 560

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C C00163832**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 01 / 2012

Transaction ID : SA11C.61966

Amount of Each Receipt this Period
2500.00

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

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

8750.00

**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 70
	<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)
DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION

A. Mailing Address 8400 Westpark Drive

City State Zip Code
McLean VA 22102

FEC ID number of contributing federal political committee. **C** C00040998

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
04 / 01 / 2012

Transaction ID : SA11C.61932

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

B. Mailing Address 3699 WILSHIRE BLVD., #1290

City State Zip Code
LOS ANGELES CA 90010

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

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

Transaction ID : SA11C.61934

Amount of Each Receipt this Period
1500.00

Full Name (Last, First, Middle Initial)
GOOGLE INC. NETPAC

C. Mailing Address 1101 NEW YORK AVENUE, NW
SECOND FLOOR

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00428623

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
05 / 02 / 2012

Transaction ID : SA11C.61949

Amount of Each Receipt this Period
2000.00

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

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

6000.00

**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 18 OF 70
	<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)
INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS

Mailing Address 1750 NEW YORK NW

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C70003108

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 Y
 05 / 16 / 2012

Transaction ID : SA11C.61945

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 1550 Crystal Drive
Suite 300

City State Zip Code
Arlington VA 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

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

Transaction ID : SA11C.61938

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC

Mailing Address 1325 Massachusetts Ave. NW

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2012

Transaction ID : SA11C.61970

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 19 OF 70
(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)
NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 North Michigan Avenue

City Chicago State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2012

Transaction ID : SA11C.61975

Amount of Each Receipt this Period
3000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1101 KING STREET
SUITE 600

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00144766

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
 06 / 07 / 2012

Transaction ID : SA11C.61972

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
NATIONAL COMMITTEE TO PRESERVE SOCIAL SECURITY & MEDICARE PAC

Mailing Address 10 G ST. NE
SUITE 600

City WASHINGTON State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00172296

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2012

Transaction ID : SA11C.61971

Amount of Each Receipt this Period
1000.00

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

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

6500.00

**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 70
	<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)
NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND

Mailing Address **3 COMMERCIAL PLACE**

City State Zip Code
NORFOLK VA 23510

FEC ID number of contributing federal political committee. **C C00009282**

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
05 01 2012
Transaction ID : SA11C.61964

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
PEPCO HOLDINGS, INC POLITICAL ACTION COMMITTEE ('PHI PAC')

Mailing Address **701 NINTH STREET NW
ROOM 1207**

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C C00385849**

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
05 02 2012
Transaction ID : SA11C.61936

Amount of Each Receipt this Period
1000.00

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

Mailing Address **1 ELMCROFT ROAD
MSC 63-20**

City State Zip Code
STAMFORD CT 06926

FEC ID number of contributing federal political committee. **C C00339499**

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
06 11 2012
Transaction ID : SA11C.61960

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional).....	5500.00
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 70
	<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)
PROFESSIONAL AVIATION SAFETY SPECIALISTS PAC

Mailing Address 1150 17TH STREET NW
SUITE 702

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00286807

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
 05 / 21 / 2012

Transaction ID : SA11C.61943

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
SQUIRE SANDERS (US) LLP POLITICAL ACTION COMMITTEE 'SQUIRE SANDERS PAC'

Mailing Address 1201 PENNSYLVANIA AVENUE NW

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00444935

Name of Employer Occupation

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
 05 / 07 / 2012

Transaction ID : SA11C.61941

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
TEXAS INSTRUMENTS INCORPORATED POLITICAL ACTION COMMITTEE (TI PAC)

Mailing Address PO BOX 742496

City DALLAS State TX Zip Code 75374

FEC ID number of contributing federal political committee. **C** C00007070

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 Y
 05 / 07 / 2012

Transaction ID : SA11C.61957

Amount of Each Receipt this Period
1000.00

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

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

2500.00

**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 70
	<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)
TRANSPORTATION TRADES DEPARTMENT AFL-CIO POLITICAL ACTION COMMITTEE (TTD/PAC)

Mailing Address 888 16TH ST NW SUITE 650

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00280909

Name of Employer Occupation

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
 06 / 25 / 2012

Transaction ID : SA11C.61965

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT

Mailing Address 600 13TH ST., NW SUITE 340

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00010470

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
 06 / 11 / 2012

Transaction ID : SA11C.61962

Amount of Each Receipt this Period
 2500.00

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

Mailing Address 1101 PENNSYLVANIA AVE, NW 10TH FLOOR

City WASHINGTON State DC Zip Code 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 2500.00

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

Transaction ID : SA11C.61929

Amount of Each Receipt this Period
 1500.00

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

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

4500.00

52750.00

**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 23 OF 70	
	<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 04 / 08 / 2012
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 17.42
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Fund Raising Fees	Transaction ID : SB17.62191
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" 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 04 / 15 / 2012
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 44.06
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Fund Raising Fees	Transaction ID : SB17.62192
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" 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 04 / 22 / 2012
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 0.15
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Fund Raising Fees	Transaction ID : SB17.62193
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	61.63
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 24 OF 70			
	<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 04 / 29 / 2012	
Mailing Address 14 Arrow Street			Amount of Each Disbursement this Period 2.97	
City Cambridge	State MA	Zip Code 02138	Transaction ID : SB17.62194	
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 type="checkbox"/> Primary <input checked="" 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 05 / 06 / 2012	
Mailing Address 14 Arrow Street			Amount of Each Disbursement this Period 7.87	
City Cambridge	State MA	Zip Code 02138	Transaction ID : SB17.62195	
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 type="checkbox"/> Primary <input checked="" 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 05 / 13 / 2012	
Mailing Address 14 Arrow Street			Amount of Each Disbursement this Period 1.50	
City Cambridge	State MA	Zip Code 02138	Transaction ID : SB17.62196	
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	12.34
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 70			
	<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 05 / 20 / 2012
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 16.35 Transaction ID : SB17.62197
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 type="checkbox"/> Primary <input checked="" 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 05 / 28 / 2012
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 5.73 Transaction ID : SB17.62198
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 type="checkbox"/> Primary <input checked="" 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 06 / 03 / 2012
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 6.80 Transaction ID : SB17.62199
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	28.80
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 26 OF 70	
	<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 06 / 10 / 2012
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 22.89 Transaction ID : SB17.62200
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 type="checkbox"/> Primary <input checked="" 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 06 / 17 / 2012
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 4.27 Transaction ID : SB17.62201
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 type="checkbox"/> Primary <input checked="" 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 06 / 24 / 2012
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 5.05 Transaction ID : SB17.62202
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	32.21
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 70			
	<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 06 / 30 / 2012		
Mailing Address 14 Arrow Street			Amount of Each Disbursement this Period 12.34		
City Cambridge	State MA	Zip Code 02138	Transaction ID : SB17.62203		
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. American Airlines			Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2012		
Mailing Address 4333 Amon Carter Boulevard			Amount of Each Disbursement this Period 829.60		
City Fort Worth	State TX	Zip Code 76155	Transaction ID : SB17.62227		
Purpose of Disbursement Travel - Airfare		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. American Airlines			Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2012		
Mailing Address 4333 Amon Carter Boulevard			Amount of Each Disbursement this Period 135.00		
City Fort Worth	State TX	Zip Code 76155	Transaction ID : SB17.62226		
Purpose of Disbursement Travel - Airfare		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	976.94
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 70	
	<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. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address 4333 Amon Carter Boulevard		Amount of Each Disbursement this Period 25.00
City Fort Worth	State TX	
Zip Code 76155	Purpose of Disbursement Travel - Baggage Handling Fees	Transaction ID : SB17.62225
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address PO Box 981540		Amount of Each Disbursement this Period 1472.50
City El Paso	State TX	
Zip Code 79998	Purpose of Disbursement Travel Reimbursement - Airfare	Transaction ID : SB17.62213
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. American Express		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2012
Mailing Address PO Box 981540		Amount of Each Disbursement this Period 2187.65
City El Paso	State TX	
Zip Code 79998	Purpose of Disbursement Travel Reimbursement - Airfare	Transaction ID : SB17.62214
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3685.15
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 70	
	<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. Amtrack		Date of Disbursement MM / DD / YYYY 06 / 07 / 2012
Mailing Address 60 Massachusettes Avenue NE		Amount of Each Disbursement this Period 601.00
City Washington	State DC	
Zip Code 22312	Purpose of Disbursement Travel - Train Fare	Transaction ID : SB17.62228
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Anne Arundle County Democratic Central Committee		Date of Disbursement MM / DD / YYYY 04 / 23 / 2012
Mailing Address PO Box 487		Amount of Each Disbursement this Period 1000.00
City Glen Burnie	State MD	
Zip Code 21060	Purpose of Disbursement Sponsorship/Ad	Transaction ID : SB17.61868
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Association of American Railroads		Date of Disbursement MM / DD / YYYY 06 / 13 / 2012
Mailing Address 425 Third Street SW Suite 1000		Amount of Each Disbursement this Period 150.00
City Washington	State DC	
Zip Code 20024	Purpose of Disbursement Space Rental - Fundraiser	Transaction ID : SB17.62229
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1751.00
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 30 OF 70	
	<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 04 / 02 / 2012
Mailing Address P.O. Box 200		Amount of Each Disbursement this Period 37.45 Transaction ID : SB17.62215
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 type="checkbox"/> Primary <input checked="" 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 04 / 03 / 2012
Mailing Address P.O. Box 200		Amount of Each Disbursement this Period 7.95 Transaction ID : SB17.62204
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 type="checkbox"/> Primary <input checked="" 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 04 / 03 / 2012
Mailing Address P.O. Box 200		Amount of Each Disbursement this Period 7.95 Transaction ID : SB17.62207
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 type="checkbox"/> Primary <input checked="" 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 31 OF 70	
	<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 04 / 16 / 2012
Mailing Address P.O. Box 200		Amount of Each Disbursement this Period 36.90 Transaction ID : SB17.62218
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 type="checkbox"/> Primary <input checked="" 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 05 / 01 / 2012
Mailing Address P.O. Box 200		Amount of Each Disbursement this Period 37.45 Transaction ID : SB17.62216
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 type="checkbox"/> Primary <input checked="" 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 05 / 03 / 2012
Mailing Address P.O. Box 200		Amount of Each Disbursement this Period 7.95 Transaction ID : SB17.62205
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	82.30
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 70			
	<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 05 / 03 / 2012	
Mailing Address P.O. Box 200			Amount of Each Disbursement this Period 7.95	
City Wilson	State NC	Zip Code 27894-0200	Transaction ID : SB17.62208	
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 type="checkbox"/> Primary <input checked="" 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 05 / 15 / 2012	
Mailing Address P.O. Box 200			Amount of Each Disbursement this Period 36.90	
City Wilson	State NC	Zip Code 27894-0200	Transaction ID : SB17.62219	
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 type="checkbox"/> Primary <input checked="" 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 05 / 21 / 2012	
Mailing Address P.O. Box 200			Amount of Each Disbursement this Period 2.00	
City Wilson	State NC	Zip Code 27894-0200	Transaction ID : SB17.62221	
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	46.85
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 70	
	<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 06 / 04 / 2012
Mailing Address P.O. Box 200		Amount of Each Disbursement this Period 7.95 Transaction ID : SB17.62206
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 type="checkbox"/> Primary <input checked="" 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 06 / 04 / 2012
Mailing Address P.O. Box 200		Amount of Each Disbursement this Period 7.95 Transaction ID : SB17.62209
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 type="checkbox"/> Primary <input checked="" 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 06 / 04 / 2012
Mailing Address P.O. Box 200		Amount of Each Disbursement this Period 37.45 Transaction ID : SB17.62217
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 type="checkbox"/> Primary <input checked="" 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 34 OF 70			
	<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 06 / 15 / 2012
Mailing Address P.O. Box 200		Amount of Each Disbursement this Period 36.90
City Wilson	State NC	
Zip Code 27894-0200	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : SB17.62220
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" 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 06 / 21 / 2012
Mailing Address P.O. Box 200		Amount of Each Disbursement this Period 2.00
City Wilson	State NC	
Zip Code 27894-0200	Purpose of Disbursement Bank Fees	Transaction ID : SB17.62222
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. BJ's Wholesale Club		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address 1781 Ritchie Station Court		Amount of Each Disbursement this Period 397.85
City Capitol Heights	State MD	
Zip Code 20743	Purpose of Disbursement Food & Beverage - Campaign Event	Transaction ID : SB17.62185
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	436.75
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 35 OF 70	
	<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. Bond 45			Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2012	
Mailing Address 149 Waterfront Street			Amount of Each Disbursement this Period 143.38	
City National Harbor	State MD	Zip Code 20745	Transaction ID : SB17.62230	
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 type="checkbox"/> Primary <input checked="" 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 04 / 23 / 2012	
Mailing Address 149 Waterfront Street			Amount of Each Disbursement this Period 91.00	
City National Harbor	State MD	Zip Code 20745	Transaction ID : SB17.62231	
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 type="checkbox"/> Primary <input checked="" 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 05 / 07 / 2012	
Mailing Address 149 Waterfront Street			Amount of Each Disbursement this Period 1928.96	
City National Harbor	State MD	Zip Code 20745	Transaction ID : SB17.62232	
Purpose of Disbursement Food & Beverage - Campaign Meeting		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	2163.34
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 70	
	<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 04 / 03 / 2012
Mailing Address 4530 Wisconsin Avenue NW		Amount of Each Disbursement this Period 429.12 Transaction ID : SB17.62236
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 type="checkbox"/> Primary <input checked="" 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 04 / 03 / 2012
Mailing Address 4530 Wisconsin Avenue NW		Amount of Each Disbursement this Period 149.76 Transaction ID : SB17.62237
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 type="checkbox"/> Primary <input checked="" 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 05 / 01 / 2012
Mailing Address 4530 Wisconsin Avenue NW		Amount of Each Disbursement this Period 129.60 Transaction ID : SB17.62238
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	429.12
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 70	
	<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 05 / 30 / 2012
Mailing Address 4530 Wisconsin Avenue NW		Amount of Each Disbursement this Period 195.45 Transaction ID : SB17.62239
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 type="checkbox"/> Primary <input checked="" 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 05 / 30 / 2012
Mailing Address 4530 Wisconsin Avenue NW		Amount of Each Disbursement this Period 195.45 Transaction ID : SB17.62240
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 type="checkbox"/> Primary <input checked="" 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 06 / 13 / 2012
Mailing Address 4530 Wisconsin Avenue NW		Amount of Each Disbursement this Period 186.44 Transaction ID : SB17.62241
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	577.34
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 70			
	<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 MM / DD / YYYY 06 / 13 / 2012
Mailing Address 4530 Wisconsin Avenue NW		Amount of Each Disbursement this Period 4,000.00 186.44
City Washington State DC Zip Code 20016	Purpose of Disbursement Car Service	
Candidate Name	Category/Type	Transaction ID : SB17.62242
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Carey International, Inc.		Date of Disbursement MM / DD / YYYY 06 / 18 / 2012
Mailing Address 4530 Wisconsin Avenue NW		Amount of Each Disbursement this Period 4,000.00 118.53
City Washington State DC Zip Code 20016	Purpose of Disbursement Car Service	
Candidate Name	Category/Type	Transaction ID : SB17.62243
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Carey International, Inc.		Date of Disbursement MM / DD / YYYY 06 / 28 / 2012
Mailing Address 4530 Wisconsin Avenue NW		Amount of Each Disbursement this Period 4,000.00 142.50
City Washington State DC Zip Code 20016	Purpose of Disbursement Car Service	
Candidate Name	Category/Type	Transaction ID : SB17.62244
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional)	447.47
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 70	
	<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 06 / 29 / 2012
Mailing Address 4530 Wisconsin Avenue NW		Amount of Each Disbursement this Period 142.50 Transaction ID : SB17.62245
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Charlie Palmer Steak		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address 101 Constitution Avenue NW		Amount of Each Disbursement this Period 1004.85 Transaction ID : SB17.62251
City Washington State DC Zip Code 20001	Purpose of Disbursement Space Rental & Food - Campaign Event	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" 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 04 / 02 / 2012
Mailing Address 1601 Trapelo Road Suite 329		Amount of Each Disbursement this Period 80.00 Transaction ID : SB17.62210
City Waltham State MA Zip Code 02451	Purpose of Disbursement Email Marketing and Survey Tools	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1227.35
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 40 OF 70	
	<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 05 / 02 / 2012
Mailing Address 1601 Trapelo Road Suite 329		Amount of Each Disbursement this Period 80.00
City Waltham	State MA Zip Code 02451	
Purpose of Disbursement Email Marketing and Survey Tools	Category/Type	Transaction ID : SB17.62211
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" 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 06 / 04 / 2012
Mailing Address 1601 Trapelo Road Suite 329		Amount of Each Disbursement this Period 80.00
City Waltham	State MA Zip Code 02451	
Purpose of Disbursement Email Marketing and Survey Tools	Category/Type	Transaction ID : SB17.62212
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2012
Mailing Address 430 South Capitol Street, SE 2nd Floor		Amount of Each Disbursement this Period 24000.00
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Dues	Category/Type	Transaction ID : SB17.61867
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	24160.00
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 41 OF 70			
	<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
Mailing Address 9211 Livingston Road		M M / D D / Y Y Y Y 04 / 18 / 2012
City Fort Washington	State MD	Zip Code 20744
Purpose of Disbursement Storage		Amount of Each Disbursement this Period 211.00
Candidate Name		Transaction ID : SB17.62188
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) B. Extra Space Storage		Date of Disbursement
Mailing Address 9211 Livingston Road		M M / D D / Y Y Y Y 05 / 18 / 2012
City Fort Washington	State MD	Zip Code 20744
Purpose of Disbursement Storage		Amount of Each Disbursement this Period 227.00
Candidate Name		Transaction ID : SB17.62189
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) c. Extra Space Storage		Date of Disbursement
Mailing Address 9211 Livingston Road		M M / D D / Y Y Y Y 06 / 25 / 2012
City Fort Washington	State MD	Zip Code 20744
Purpose of Disbursement Storage		Amount of Each Disbursement this Period 227.00
Candidate Name		Transaction ID : SB17.62190
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	665.00
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 42 OF 70	
	<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 04 / 05 / 2012
Mailing Address PO BOX 33106		Amount of Each Disbursement this Period 5.50
City WASHINGTON	State DC	
Zip Code 20033	Purpose of Disbursement Fund Raising Fees	Transaction ID : SB17.61918
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" 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 05 / 31 / 2012
Mailing Address PO BOX 33106		Amount of Each Disbursement this Period 27.50
City WASHINGTON	State DC	
Zip Code 20033	Purpose of Disbursement Fund Raising Fees	Transaction ID : SB17.61919
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. JSTREETPAC		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address PO BOX 33106		Amount of Each Disbursement this Period 2.75
City WASHINGTON	State DC	
Zip Code 20033	Purpose of Disbursement Fund Raising Fees	Transaction ID : SB17.61920
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	35.75
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 43 OF 70	
	<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 06 / 21 / 2012
Mailing Address PO BOX 33106		Amount of Each Disbursement this Period 0.27 Transaction ID : SB17.61921
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. LEAGUE OF CONSERVATION VOTERS ACTION FUND		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2012
Mailing Address 1920 L St NW Suite 800		Amount of Each Disbursement this Period 10.17 Transaction ID : SB17.61922
City Washington	State DC	
Zip Code 20036	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. LEAGUE OF CONSERVATION VOTERS ACTION FUND		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address 1920 L St NW Suite 800		Amount of Each Disbursement this Period 6.00 Transaction ID : SB17.61923
City Washington	State DC	
Zip Code 20036	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	16.44
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 44 OF 70	
	<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. LEAGUE OF CONSERVATION VOTERS ACTION FUND			Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012	
Mailing Address 1920 L St NW Suite 800			Amount of Each Disbursement this Period 2.40	
City Washington	State DC	Zip Code 20036	Transaction ID : SB17.61924	
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. LEAGUE OF CONSERVATION VOTERS ACTION FUND			Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012	
Mailing Address 1920 L St NW Suite 800			Amount of Each Disbursement this Period 2.47	
City Washington	State DC	Zip Code 20036	Transaction ID : SB17.61925	
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. LEAGUE OF CONSERVATION VOTERS ACTION FUND			Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2012	
Mailing Address 1920 L St NW Suite 800			Amount of Each Disbursement this Period 1.20	
City Washington	State DC	Zip Code 20036	Transaction ID : SB17.61926	
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	6.07
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 70	
	<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. Maryland State and District of Columbia AFL-CIO		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address PO Box 26428		Amount of Each Disbursement this Period 750.00 Transaction ID : SB17.62179
City Baltimore	State MD	
Zip Code 21027	Purpose of Disbursement Sponsorship/Ad	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. McLoone's Pier House		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2012
Mailing Address 141 National Harbor Plaza		Amount of Each Disbursement this Period 133.26 Transaction ID : SB17.62262
City National Harbor	State MD	
Zip Code 20745	Purpose of Disbursement Meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" 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 06 / 21 / 2012
Mailing Address 2698 Willow Hill Road		Amount of Each Disbursement this Period 4400.00 Transaction ID : SB17.62187
City Annapolis	State MD	
Zip Code 21403	Purpose of Disbursement Office Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	5283.26
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 70	
	<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. MONTGOMERY COUNTY DEMOCRATIC CENTRAL COMMITTEE			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012	
Mailing Address 3720 Farragut Avenue 3rd Fl			Amount of Each Disbursement this Period 400.00	
City Kensington	State MD	Zip Code 20895	Transaction ID : SB17.61869	
Purpose of Disbursement Sponsorship		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. NAACP of Prince George's County			Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2012	
Mailing Address 9201 Basil Court Suite 115			Amount of Each Disbursement this Period 700.00	
City Largo	State MD	Zip Code 20774	Transaction ID : SB17.62183	
Purpose of Disbursement Sponsorship		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. National Democratic Club			Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012	
Mailing Address 30 Ivy Street SE			Amount of Each Disbursement this Period 50.00	
City Washington	State DC	Zip Code 20003	Transaction ID : SB17.62263	
Purpose of Disbursement Meals		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1150.00
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 47 OF 70	
	<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. NGP Software, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 1225 Eye Street, NW		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.62264
City Washington	State DC Zip Code 20005	
Purpose of Disbursement Fund Raising Software	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Oxon Hill Rentals		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2012
Mailing Address 9120 Livingston Road		Amount of Each Disbursement this Period 328.91 Transaction ID : SB17.62186
City Fort Washington	State MD Zip Code 20744	
Purpose of Disbursement Baseball Game	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" 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 04 / 03 / 2012
Mailing Address 10503 Sweetbriar Parkway		Amount of Each Disbursement this Period 7000.00 Transaction ID : SB17.62175
City Silver Spring	State MD Zip Code 20903	
Purpose of Disbursement Consulting Services - Fund Raising	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8828.91
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 70		
	<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 MM / DD / YYYY 05 / 02 / 2012
Mailing Address 10503 Sweetbriar Parkway		Amount of Each Disbursement this Period 7000.00 Transaction ID : SB17.62176
City Silver Spring	State MD	
Zip Code 20903	Purpose of Disbursement Consulting Services - Fund Raising	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Jeremiah Pope		Date of Disbursement MM / DD / YYYY 05 / 02 / 2012
Mailing Address 10503 Sweetbriar Parkway		Amount of Each Disbursement this Period 10000.00 Transaction ID : SB17.62178
City Silver Spring	State MD	
Zip Code 20903	Purpose of Disbursement Consulting Services - Fund Raising	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Jeremiah Pope		Date of Disbursement MM / DD / YYYY 06 / 04 / 2012
Mailing Address 10503 Sweetbriar Parkway		Amount of Each Disbursement this Period 7000.00 Transaction ID : SB17.62180
City Silver Spring	State MD	
Zip Code 20903	Purpose of Disbursement Consulting Services - Fund Raising	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	24000.00
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 70			
	<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. Reston Limousine		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2012
Mailing Address 45685 Elmwood Court		Amount of Each Disbursement this Period 537.34 Transaction ID : SB17.62265
City Dulles	State VA	
Zip Code 20166	Purpose of Disbursement Shuttle Service	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Reston Limousine		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2012
Mailing Address 45685 Elmwood Court		Amount of Each Disbursement this Period 736.32 Transaction ID : SB17.62266
City Dulles	State VA	
Zip Code 20166	Purpose of Disbursement Shuttle Service	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Schwan's Home Service, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 115 West College Drive		Amount of Each Disbursement this Period 408.54 Transaction ID : SB17.62270
City Marshall	State MN	
Zip Code 56258	Purpose of Disbursement Food - Campaign Event	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1682.20
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 50 OF 70			
	<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 04 / 02 / 2012
Mailing Address 8511 Oxon Hill Road		Amount of Each Disbursement this Period 58.42
City Fort Washington	State MD	
Zip Code 20744	Purpose of Disbursement Gas	Transaction ID : SB17.62271
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" 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 04 / 04 / 2012
Mailing Address 8511 Oxon Hill Road		Amount of Each Disbursement this Period 42.46
City Fort Washington	State MD	
Zip Code 20744	Purpose of Disbursement Gas	Transaction ID : SB17.62272
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" 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 04 / 23 / 2012
Mailing Address 8511 Oxon Hill Road		Amount of Each Disbursement this Period 49.70
City Fort Washington	State MD	
Zip Code 20744	Purpose of Disbursement Gas	Transaction ID : SB17.62273
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	150.58
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 70	
	<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 04 / 26 / 2012
Mailing Address 8511 Oxon Hill Road		Amount of Each Disbursement this Period 52.34 Transaction ID : SB17.62274
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 type="checkbox"/> Primary <input checked="" 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 05 / 14 / 2012
Mailing Address 8511 Oxon Hill Road		Amount of Each Disbursement this Period 59.23 Transaction ID : SB17.62275
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 type="checkbox"/> Primary <input checked="" 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 05 / 21 / 2012
Mailing Address 8511 Oxon Hill Road		Amount of Each Disbursement this Period 42.74 Transaction ID : SB17.62276
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	154.31
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 70			
	<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 05 / 30 / 2012
Mailing Address 8511 Oxon Hill Road		Amount of Each Disbursement this Period 35.07
City Fort Washington	State MD	
Zip Code 20744	Purpose of Disbursement Gas	Transaction ID : SB17.62277
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" 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 06 / 06 / 2012
Mailing Address 8511 Oxon Hill Road		Amount of Each Disbursement this Period 53.58
City Fort Washington	State MD	
Zip Code 20744	Purpose of Disbursement Gas	Transaction ID : SB17.62278
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" 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 06 / 14 / 2012
Mailing Address 8511 Oxon Hill Road		Amount of Each Disbursement this Period 40.36
City Fort Washington	State MD	
Zip Code 20744	Purpose of Disbursement Gas	Transaction ID : SB17.62279
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	129.01
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 70			
	<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 MM / DD / YYYY 06 / 21 / 2012
Mailing Address 8511 Oxon Hill Road		Amount of Each Disbursement this Period 38.56 Transaction ID : SB17.62280
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Sononaco, Inc.		Date of Disbursement MM / DD / YYYY 04 / 25 / 2012
Mailing Address 1411 K Street NW Suite 1400		Amount of Each Disbursement this Period 769.13 Transaction ID : SB17.62281
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Web Hosting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Staples #584		Date of Disbursement MM / DD / YYYY 04 / 01 / 2012
Mailing Address 6139 Oxon Hill Road		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.62173
City Oxon Hill	State MD	
Zip Code 20745	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1107.69
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 70	
	<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. Star Catering		Date of Disbursement MM / DD / YYYY 06 / 13 / 2012
Mailing Address 2002 Mount Vernon Avenue		Amount of Each Disbursement this Period 224.37 Transaction ID : SB17.62284
City Alexandria	State VA Zip Code 22301	
Purpose of Disbursement Catering Services - Campaign Event		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Stones' Phones		Date of Disbursement MM / DD / YYYY 04 / 19 / 2012
Mailing Address 121 S. Palm Canyon Drive Suite 205		Amount of Each Disbursement this Period 1139.58 Transaction ID : SB17.62287
City Palm Springs	State CA Zip Code 92262	
Purpose of Disbursement Automated Phone Calls		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. The Liaison Capitol Hill		Date of Disbursement MM / DD / YYYY 05 / 17 / 2012
Mailing Address 415 New Jersey Avenue NW		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.62291
City Washington	State DC Zip Code 20001	
Purpose of Disbursement Space Rental & Catering - Fundraiser		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2363.95
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 55 OF 70			
	<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. TruBlu Politics		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 15000 Pine Top Lane		Amount of Each Disbursement this Period 17292.15 Transaction ID : SB17.62174
City Burtonsville	State MD	
Zip Code 20866	Purpose of Disbursement Campaign Mailing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. TruBlu Politics		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2012
Mailing Address 15000 Pine Top Lane		Amount of Each Disbursement this Period 363.08 Transaction ID : SB17.62282
City Burtonsville	State MD	
Zip Code 20866	Purpose of Disbursement Campaign T-shirts	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) C. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2012
Mailing Address 77 West Wacker Drive		Amount of Each Disbursement this Period 573.30 Transaction ID : SB17.62292
City Chicago	State IL	
Zip Code 60601	Purpose of Disbursement Travel - Airfare	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	18228.53
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 56 OF 70	
	<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 05 / 21 / 2012
Mailing Address 77 West Wacker Drive		Amount of Each Disbursement this Period 25.00 Transaction ID : SB17.62298
City Chicago	State IL Zip Code 60601	
Purpose of Disbursement Travel - Baggage Handling Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 77 West Wacker Drive		Amount of Each Disbursement this Period 25.00 Transaction ID : SB17.62295
City Chicago	State IL Zip Code 60601	
Purpose of Disbursement Travel - Baggage Handling Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2012
Mailing Address 77 West Wacker Drive		Amount of Each Disbursement this Period 844.30 Transaction ID : SB17.62293
City Chicago	State IL Zip Code 60601	
Purpose of Disbursement Travel - Airfare	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	894.30
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 57 OF 70		
	<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 06 / 21 / 2012
Mailing Address 77 West Wacker Drive		Amount of Each Disbursement this Period 25.00 Transaction ID : SB17.62296
City Chicago State IL Zip Code 60601	Purpose of Disbursement Travel - Baggage Handling Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2012
Mailing Address 77 West Wacker Drive		Amount of Each Disbursement this Period 59.00 Transaction ID : SB17.62299
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2012
Mailing Address 77 West Wacker Drive		Amount of Each Disbursement this Period 995.10 Transaction ID : SB17.62294
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1079.10
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 58 OF 70			
	<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 06 / 25 / 2012
Mailing Address 77 West Wacker Drive		Amount of Each Disbursement this Period 7.00
City Chicago	State IL Zip Code 60601	
Purpose of Disbursement Travel - In-flight Meal	Category/Type	Transaction ID : SB17.62300
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address 77 West Wacker Drive		Amount of Each Disbursement this Period 25.00
City Chicago	State IL Zip Code 60601	
Purpose of Disbursement Travel - Baggage Handling Fees	Category/Type	Transaction ID : SB17.62301
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address 77 West Wacker Drive		Amount of Each Disbursement this Period 69.00
City Chicago	State IL Zip Code 60601	
Purpose of Disbursement Travel - Airfare	Category/Type	Transaction ID : SB17.62302
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	101.00
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 59 OF 70			
	<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 06 / 25 / 2012
Mailing Address 77 West Wacker Drive		Amount of Each Disbursement this Period 159.00 Transaction ID : SB17.62303
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address 77 West Wacker Drive		Amount of Each Disbursement this Period 25.00 Transaction ID : SB17.62297
City Chicago State IL Zip Code 60601	Purpose of Disbursement Travel - Baggage Handling Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2012
Mailing Address 77 West Wacker Drive		Amount of Each Disbursement this Period 15.49 Transaction ID : SB17.62304
City Chicago State IL Zip Code 60601	Purpose of Disbursement Travel - In-flight Meal	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	199.49
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 60 OF 70	
	<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 05 / 02 / 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 Fees		Transaction ID : SB17.62306
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) B. US Airways		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address 4000 E. Sky Harbor Blvd		Amount of Each Disbursement this Period 391.60
City Phoenix	State AZ Zip Code 85043	
Purpose of Disbursement Travel - Airfare		Transaction ID : SB17.62307
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) c. US Airways		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2012
Mailing Address 4000 E. Sky Harbor Blvd		Amount of Each Disbursement this Period 75.00
City Phoenix	State AZ Zip Code 85043	
Purpose of Disbursement Travel - Airfare		Transaction ID : SB17.62308
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	491.60
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 61 OF 70	
	<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 05 / 18 / 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 Fees	Transaction ID : SB17.62309
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" 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 05 / 18 / 2012
Mailing Address 4000 E. Sky Harbor Blvd		Amount of Each Disbursement this Period 378.80
City Phoenix	State AZ	
Zip Code 85043	Purpose of Disbursement Travel - Airfare	Transaction ID : SB17.62310
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" 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 05 / 29 / 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 Fees	Transaction ID : SB17.62311
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	428.80
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 62 OF 70		
	<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 05 / 29 / 2012
Mailing Address 4000 E. Sky Harbor Blvd		Amount of Each Disbursement this Period 212.00 Transaction ID : SB17.62312
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 type="checkbox"/> Primary <input checked="" 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 05 / 29 / 2012
Mailing Address 4000 E. Sky Harbor Blvd		Amount of Each Disbursement this Period 25.00 Transaction ID : SB17.62313
City Phoenix State AZ Zip Code 85043	Purpose of Disbursement Travel - Baggage Handling Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" 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 06 / 18 / 2012
Mailing Address 4000 E. Sky Harbor Blvd		Amount of Each Disbursement this Period 67.00 Transaction ID : SB17.62305
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	217.00
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 63 OF 70	
	<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 MM / DD / YYYY 06 / 18 / 2012
Mailing Address 4000 E. Sky Harbor Blvd		Amount of Each Disbursement this Period 75.00
City Phoenix	State AZ Zip Code 85043	
Purpose of Disbursement Travel - Airfare	Category/Type	Transaction ID : SB17.62314
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. US Airways		Date of Disbursement MM / DD / YYYY 06 / 18 / 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 Fees	Category/Type	Transaction ID : SB17.62315
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Verizon		Date of Disbursement MM / DD / YYYY 05 / 01 / 2012
Mailing Address PO Box 17577		Amount of Each Disbursement this Period 211.72
City Baltimore	State MD Zip Code 21297	
Purpose of Disbursement Phones	Category/Type	Transaction ID : SB17.62177
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	311.72
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 64 OF 70	
	<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 06 / 06 / 2012
Mailing Address PO Box 17577		Amount of Each Disbursement this Period 214.87
City Baltimore	State MD	
Zip Code 21297	Category/ Type	Transaction ID : SB17.62181
Purpose of Disbursement Phones		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Daniel Weber		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2012
Mailing Address 1356 Kenyon St. NW, #2		Amount of Each Disbursement this Period 1716.00
City Washington	State DC	
Zip Code 20010	Category/ Type	Transaction ID : SB17.62182
Purpose of Disbursement Consulting Services - Communications		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Westin Washington National Harbor		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2012
Mailing Address 171 Waterfront Street		Amount of Each Disbursement this Period 91.79
City National Harbor	State MD	
Zip Code 20745	Category/ Type	Transaction ID : SB17.62318
Purpose of Disbursement Meals		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2022.66
TOTAL This Period (last page this line number only).....	105772.74

**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 65 OF 70	
	<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. DAVE CROOKS FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 324 EAST MAIN STREET
PO BOX 686

City WASHINGTON State IN Zip Code 47501

Purpose of Disbursement Campaign Donation

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)

State: IN District: 08

Date of Disbursement 05 / 15 / 2012

Amount of Each Disbursement this Period 500.00

Transaction ID : SB18.61891

B. DR. RAUL RUIZ FOR CONGRESS 2012 COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 73373 COUNTRY CLUB DRIVE #1904

City PALM DESERT State CA Zip Code 92260

Purpose of Disbursement Campaign Donation

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)

State: CA District: 36

Date of Disbursement 05 / 16 / 2012

Amount of Each Disbursement this Period 500.00

Transaction ID : SB18.61879

C. FRIENDS OF JOHN DELANEY

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 60320

City POTOMAC State MD Zip Code 20854

Purpose of Disbursement Campaign Donation

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)

State: MD District: 06

Date of Disbursement 05 / 15 / 2012

Amount of Each Disbursement this Period 500.00

Transaction ID : SB18.61899

SUBTOTAL of Disbursements This Page (optional)..... 1500.00

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 66 OF 70	
	<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 JOHN DELANEY		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address PO BOX 60320		Amount of Each Disbursement this Period 500.00 Transaction ID : SB18.61916
City POTOMAC State MD Zip Code 20854	Purpose of Disbursement Campaign Donation	
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MD District: 06		

Full Name (Last, First, Middle Initial) B. FRIENDS OF JULIAN SCHREIBMAN		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address PO BOX 3151		Amount of Each Disbursement this Period 500.00 Transaction ID : SB18.61907
City KINGSTON State NY Zip Code 12402	Purpose of Disbursement Campaign Donation	
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 00		

Full Name (Last, First, Middle Initial) C. FRIENDS OF PATRICK MURPHY		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address 4521 PGA BLVD. #412		Amount of Each Disbursement this Period 500.00 Transaction ID : SB18.61887
City PALM BEACH GARDENS State FL Zip Code 33418	Purpose of Disbursement Campaign Donation	
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 18		

SUBTOTAL of Disbursements This Page (optional).....	1500.00
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 67 OF 70	
	<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. JOE MIKLOSI FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address PO BOX 3975		Amount of Each Disbursement this Period 500.00 Transaction ID : SB18.61883
City GREENWOOD VILLAGE State CO Zip Code 80155	Purpose of Disbursement Campaign Donation	
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CO District: 06		

Full Name (Last, First, Middle Initial) B. KILPATRICK FOR UNITED STATES CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2012
Mailing Address PO BOX 32175		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB18.61861
City DETROIT State MI Zip Code 48232	Purpose of Disbursement Campaign Donation	
Candidate Name CAROLYN MS. KILPATRICK	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI District: 13		

Full Name (Last, First, Middle Initial) C. KREITLOW FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address 333 E PRAIRIE VIEW ROAD		Amount of Each Disbursement this Period 500.00 Transaction ID : SB18.61915
City CHIPPEWA FALLS State WI Zip Code 54729	Purpose of Disbursement Campaign Donation	
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WI District: 07		

SUBTOTAL of Disbursements This Page (optional).....	2000.00
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 68 OF 70	
	<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. LEADERSHIP THAT LISTENS PAC			Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2012	
Mailing Address PO BOX 44084			Amount of Each Disbursement this Period 2000.00	
City FORT WASHINGTON	State MD	Zip Code 20749	Transaction ID : SB18.61917	
Purpose of Disbursement Contribution		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

Full Name (Last, First, Middle Initial) B. MCDOWELL FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2012	
Mailing Address 10820 GLEN STREET			Amount of Each Disbursement this Period 500.00	
City RUDYARD	State MI	Zip Code 49780	Transaction ID : SB18.61895	
Purpose of Disbursement Campaign Donation		Category/ Type		
Candidate Name				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: MI	District: 01			

Full Name (Last, First, Middle Initial) C. PETE AGUILAR FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2012	
Mailing Address 777 S FIGUEROA ST STE 4050			Amount of Each Disbursement this Period 500.00	
City LOS ANGELES	State CA	Zip Code 90017	Transaction ID : SB18.61875	
Purpose of Disbursement Campaign Donation		Category/ Type		
Candidate Name				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: CA	District: 31			

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 69 OF 70	
	<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. SHELLEY ADLER FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2012
Mailing Address 200 LAUREL CREEK BOULEVARD		Amount of Each Disbursement this Period 500.00
City MOORESTOWN	State NJ	
Zip Code 08057	Purpose of Disbursement Campaign Donation	Transaction ID : SB18.61903
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2012	
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NJ	District: 03	

Full Name (Last, First, Middle Initial) B. TRIVEDI FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address PO BOX 66		Amount of Each Disbursement this Period 500.00
City BIRDSBORO	State PA	
Zip Code 19508	Purpose of Disbursement Campaign Donation	Transaction ID : SB18.61911
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2012	
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: PA	District: 06	

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	Disbursement For:	
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	9000.00

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